DOCUMENT RESUME

ED 373 122 UD 029 938

AUTHOR	Carter, Robert T., Ed.; Johnson, Samuel D., Jr., Ed.
TITLE	Racial Identity Theory, Research, and Applications. Edited Conference Proceedings of the Annual Teachers College Winter Roundtable on Cross-Cultural Counseling and Psychotherapy (8th, New York, New York, February 22-23, 1991).
INSTITUTION	Columbia Univ., New York, N.Y. Teachers College.
PUB DATE	Feb 91
NOTE	90p.
AVAILABLE FROM	Teachers College, Columbia University, Dept. of Counseling Psychology, Box 102, New York, NY 10027 ($12).
PUB TYPE	Collected Works - Conference Proceedings (021) -- Information Analyses (070)
EDRS PRICE	MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS	Clinical Psychology; *Counseling; Cross Cultural Studies; Cultural Awareness; Educational Research; Elementary Secondary Education; *Ethnic Groups; Feminism; Immigrants; *Minority Groups; *Multicultural Education; *Psychotherapy; *Racial Identification; Theories

ABSTRACT

The 1991 Winter Roundtable on Cross Cultural Counseling was the first national conference devoted to the topic of racial identity in counseling and psychotherapy. Conference papers include: (1) "A Brief Continuing History of the Teachers College Winter Roundtable on Cross-Cultural Counseling and Psychotherapy" (Samuel D. Johnson, Jr.); (2) "Racial Identification and Feminism: A Synthesis of Perspectives for a Focused Group Intervention" (Margaret M. Walker); (3) "Adult Transracial Adoptees and Racial Identity: Implications for Counseling" (Jana Goldsmith and Kevin Wickes); (4) "Racial Identity Research on Asian-Americans and American Indians: Is Racial Identity Misplaced or Forgotten in the Literature?" (Eric Kohatsu, And Others); (5) "The Relationship of Racial and Feminist Identity Attitudes to Black Women's Career Values" (Pamela L. Weathers, And Others); (6) "Promoting a Healthier Cultural Climate on Campus: A Racial Identity Training Approach" (Julia Yang, And Others); (7) "Issues Affecting Client-Counselor Relationships in Cross-Cultural Counseling" (Marta Aizenman and Yvonne Watson); (8) "The Integrated Cultural Influence Protocol (CICI): Relevance of Culture in Clinical Work with Hispanics" (Carmen I. Vazquez, And Others); (9) "A Developmental Approach to Group Therapy with Acting-Out Hispanic Adolescent Males" (Fred Millan and Jane Chan); (10) "Trusting Ole' Wise Owls: Therapeutic Utilization of Cultural Strengths in African-American Families" (Howard C. Stevenson and Gary Renard); (11) "Counseling Immigrant Children in the United States Public Schools" (Giselle Esquivel, And Others); and (12) "Minority Student Recruitment: Secret to Success?" (Lisa Porche-Burke, And Others). (SLD)

ED 373 122

The 1991 Teachers College Winter Roundtable Edited Conference Proceedings

Racial Identity Theory, Research, and Applications

Robert T. Carter, Ph.D.
Teachers College, Columbia University
and
Samuel D. Johnson, Jr., Ph.D.
Baruch College, City University

CG029938

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

☒ This document has been reproduced as received from the person or organization originating it

☐ Minor changes have been made to improve reproduction quality

- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

"PERMISSION TO REPRODUCE THIS
MATERIAL HAS BEEN GRANTED BY
Robert T. Carter
Teachers College
TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)."

BEST COPY AVAILABLE

The Eighth Annual Teachers College

Winter Roundtable on Cross-Cultural Counseling and Psychotherapy

1991 CONFERENCE PROCEEDINGS

Friday and Saturday, February 22-23, 1991

ACKNOWLEDGEMENTS

We would like to thank the following individuals for:

- **Editing Assistance**
  - George V. Gushue
  - Adil Qureshi
- **Typing, Layout, and Graphics**
  - Betty Engel
- **Production**
  - Robert J. Schwarz

Introduction

The Teachers College Winter Roundtable

In the winter of 1983, Teachers College initiated the first Winter Roundtable on Cross Cultural Counseling. In the nine years since that first conference, the Roundtable has become the longest running conference dedicated solely to issues of culture, race and ethnicity in counseling research practice and theory. Last year nearly 400 people attended the event for two days, making it the largest and best attended conference in the series. The Winter Roundtable stands alone as a testament to the significance of issues of diversity for the applied psychological professions. Those of us involved in its creation and development are pleased to be able to offer for the first time a bound edition of edited papers from last year's conference. It is our hope that this publication will become another tradition of the conference series that will allow access to the information shared at the Roundtable to a wider audience.

The Eighth Annual Winter Roundtable

The 1991 Winter Roundtable marked several firsts for the conference series. It was the first national conference devoted to the topic of Racial Identity in Counseling and Psychotherapy. Racial identity theory had historically been a recurrent focal theme of the conference, but last year it became the central topic. This was made even more compelling by the Keynote address given by Dr. William Cross of Cornell University, who initiated the racial identity construct in his studies during the seventies. Another first was the presentation of the Janet Helms Award to Dr. Janet Helms, who is arguably the nation's leading researcher in the area. The 1991 conference was also the first time we offered institutional participation in the Roundtable through our information exchange. It is important to note that the Roundtable is continuously evaluated to improve the range and character of the program. We are pleased to be able to offer you an additional first, the first volume of published papers out of the Teachers College Winter Roundtable.

This Volume

In our first volume of edited conference papers are selected contributions from our 1991 conference, the central theme of which was the decade of racial identity theory, research, and practical applications. We have organized the volume with the theme of the conference in mind.

The first paper in the Theory and Overview section was authored by the conference founder and offers a historical sketch and overview of the Roundtable. More importantly, Dr. Johnson for the first time describes the conceptual basis that gave rise to the Winter Roundtable at Teachers College.

The Roundtable history and conceptual foundation is followed by a thoughtful and insightful paper by M. A. Walker which blends theories of social identity and feminist models with traditional psychological theory. Not only is the Walker paper a major theoretical contribution, but it also provides clinical suggestions about how to apply her insight to a focused group intervention.

An often neglected topic in the psychological literature is discussed by Goldsmith and Wickes—transracial adoption and the role racial identity development might play. These authors also give guidelines to practitioners who wish to apply racial identity to this important social issue.

The Research section begins with a paper that discusses racial identity research as it applies to Asian Americans and Indian Americans. The paper seems to reflect the perspectives of the three authors. It is divided into three parts: Part 1 presents the findings of an empirical study of Asian American world views; Part 2 gives an analysis of the influence of the family generational network in Asian Americans, and the last part discusses racial identity as it might apply to American Indians.

The second article by Weathers, Thompson, Marvin, and Rodriquez reports the findings of a study that empirically explains the intersection between racial and feminist identity with career values for Black women.

The last study in the Research section by Yang, Waters, Jefferson, and Johnson involves an empirical investigation of whether there were significant differences in the level of White racial identity development among faculty, administrators, staff and student leaders in a small state college. We suspect the reader will find these findings enlightening.

Section Three, Counseling and Practical Applications, is comprised of six articles. Together they move us from the therapy consulting room to the university campus. Aizenman and Watso[illegible] explore cultural influences on therapy interactions. Vazquez, Caro, and Clavijo-Passik outline specific issues and approaches that should be applicable to Hispanics who may be seen in treatment. Millán and Chan also address Hispanic treatment issues; however, they focus specifically on young adult males — clearly a neglected group in the psychological literature.

Stevenson and Renard move us from individual and group theory to a consideration of families. In particular, these authors present a way for clinicians to abandon deficit and dysfunction as the primary perception and intervention goal in therapy with non-white families by showing that focusing on cultural strengths of Black/African American families can facilitate treatment.

The last two papers in this section address cultural/racial issues within the content of particular institutions. Esquivel, Kopala, and Baptiste discuss the counseling needs and approaches for immigrant children in public schools and Porche-Burke, Webb, and Ijima-Hall offer readers a guide on plans to successfully recruit non-whites to doctoral programs.

The papers in our first edited proceedings are diverse in topic, well written, and each makes a needed contribution to the cross-cultural literature.

Please Note: Questions about manuscripts should be directed to authors.

Table of Contents

Introduction ii

THEORY

A Brief Continuing History of the Teachers College Winter Roundtable on Cross-Cultural Counseling and Psychotherapy——*Samuel D. Johnson, Jr.* 1

Racial Identification and Feminism: A Synthesis of Perspectives for a Focused Group Intervention——*Margaret M. Walker* 4

Adult Transracial Adoptees and Racial Identity: Implications for Counseling ——*Jana Goldsmith and Kevin Wickes* 14

RESEARCH

Racial Identity Research on Asian-Americans and American Indians: Is Racial Identity Misplaced or Forgotten in the Literature?——*Eric Kohatsu, Lisa A. Suzuki, and Sandra K. Bennett* 19

The Relationship of Racial and Feminist Identity Attitudes to Black Women's Career Values ——*Pamela L. Weathers, Chalmer E. Thompson, Sheri L. Marvin and Jaime Rodriguez, Jr.* . . 27

Promoting a Healthier Cultural Climate on Campus: A Racial Identity Training Approach ——*Julia Yang, Lois Waters, Diane Jefferson and Janet Johnson* 37

APPLICATIONS

Issues Affecting Client-Counselor Relationships in Cross-Cultural Counseling—— *Martha Aizenman and Yvonne Watson* 46

The Integrated Cultural Influence Protocol (CICI): Relevance of Culture in Clinical Work with Hispanics——*Carmen I. Vazquez, Yvette Caro, and Alina M. Clavijo-Passik* 50

A Developmental Approach to Group Therapy with Acting-Out Hispanic Adolescent Males——*Fred Millán and Jane Chan* 58

Trusting Ole' Wise Owls: Therapeutic Utilization of Cultural Strengths in African-American Families——*Howard C. Stevenson and Gary Renard* 63

Counseling Immigrant Children in the United States Public Schools——*Giselle Esquivel, Mary Kopala, and Lucille Baptiste* 72

Minority Student Recruitment: Secret to Success?——*Lisa Porche-Burke, Msemaji Webb, and Christine Ijima-Hall* 80

A Brief Continuing History of the Teachers College Winter Roundtable on Cross Cultural Counseling and Psychotherapy

Samuel D. Johnson, Jr.

Founding Convener

Early Conceptual Development

The Teachers College Winter Roundtable on Cross Cultural Counseling and Psychotherapy had its conceptual origins in the development of the materials for my doctoral dissertation (Johnson, 1982). That project was developed on an internal curriculum development grant from the University of Minnesota. It involved soliciting participants for a weekend conference and videotape session to produce curriculum materials and stimulate interest in cultural issues in counseling among staff and students at Minnesota. That project was quite successful and solidified my relationships with an ethnically diverse national network of scholars, researchers and practitioners in the field. Two years after my arrival at Teachers College as a new Assistant Professor I was eager to utilize the network and design an activity appropriate to my new setting.

It had become clear to me that training and continuing education were going to be central to the development of the cross cultural movement in counseling. I also felt that Teachers College would make a good venue for a regional/national conference or training activity of some sort. I discussed the possibilities of such a conference with the Director of our new Office of Continuing Education who thought it was a worthwhile project, and we began to think about the first of what was to become the annual Roundtable.

In thinking about the design of the event I had established in my own mind that it should be dedicated to cross cultural counseling and psychotherapy. This was central because of my personal frustration with national conferences that only addressed these issues peripherally or in an isolated presentation or two at the end of a national event. I wanted to provide time for those involved in cross cultural counseling to share new ideas, current research, opportunities for grants, training methods, etc. among themselves and with interested graduate students. I also wanted to raise the profile of cross cultural counseling on my own campus and within my department's programs. I wanted to bring concerned, talented and like minded colleagues to New York for three days of sharing, training and thinking that would provide some central focus to the development of my notions of what cross cultural training ought to be like for both pre-service and continuing professional education. I had some preliminary discussions with senior colleagues like Paul Pedersen, Alan Ivey and Stanley Sue whom I had contacted earlier on the Minnesota Project. I found that they thought I was on the right track.

The first conference was strictly invitational. It was offered both as a special topics elective course at TC and a continuing education event. Ed Dunbar and I scanned the literature in cross cultural counseling across disciplines (psychology, psychiatry, & social work) to identify an ethnically balanced constellation of presenters. We planned the initial conference for three days beginning on the third Friday in the month of February 1983 and ending just after noon on the following Sunday. The design of the event was constructed to allow for discussion Roundtable groups at key points within the weekend. The Roundtable groups were issue oriented or focused on specific ethnic group concerns. Another unique feature of the design was the fact that it was offered both as a graduate elective course and a continuing professional education experience. This aspect of the event made it attractive to multiple audiences.

We were very fortunate to secure the participation of many of the leading figures in the field at that time, including A. J. Franklin, Paul Pedersen, Juris Draguns, Janet Helms, John Papajohn, Frank Montalvo, Lewis King, Esteban Olmedo, and several other specialists too numerous to list. We drew 45 Teachers College students and about 30 others from around the region and the country. The Roundtable was successful both intellectually and financially, in spite of one of the worst snow storms of the century that dropped over two feet of snow on the New York Metropolitan area. Our participants turned out to be regional and national. This result figured prominently in later developments for the event.

Roundtable Effects

In our post event evaluation, several things became clear. First, there was a felt need for an event like the Roundtable. The focus, intensity and collegiality generated by students, academics and other specialists spending concentrated time on issues of mutual concern was highly valued by all in attendance. Second, it had the desired effect locally. Graduate students across specializations in psychology came forward to express their desire for more training and course work in cross cultural issues. In addition the spin off effects of generating student interest in our program, its courses, and my own research paid large dividends. The Roundtable experience made it possible for me to generate support for required course work in cross cultural issues as part of the graduate counseling training curriculum at the college. Third, the event demonstrated its broad appeal. Many of my own feelings were confirmed by initial participants who felt that having a conference that only addressed cross cultural counseling issues was truly beneficial. Fourth, it made money. During these early years of the college's continuing education efforts, the Roundtable covered its modest expenses and turned a respectable profit. There was no question that we would do it again.

The Middle Years

The next series of Roundtables 1984-87 shared the basic format of the first. The Roundtable seemed to be a model for meeting needs for training and information at both the pre-service and in-service levels. Each year we relied on the literature to define local and national issues in research, practice and training to frame a topic and invite speakers. Our network grew as individuals became Roundtable regulars. Several topics became recurring theme strands. Our programs mirrored developments in the field. As issues became prominent in the field, we made them prominent in the Roundtables. Racial Identity as studied by Janet Helms and her colleagues evolved into a central commitment. Cross Cultural Training likewise became a core commitment of the conference. The need for practical training reinforced the continued offering of workshop experiences.

The national context for the issues we began to address in 1983 became much more supportive. This was due in part to the increased significance attributed to cross cultural counseling during the mid 1980's. In 1982 I was virtually run out of NIMH's minority research grants office because they only were interested in work framed in racial terms. By 1986 even that group began to support research and conferences dealing with cultural issues. The Roundtable grew as cross cultural counseling achieved national prominence as a framework for enhancing service provided to previously underserved or ineffectively served groups. Similar growth took place at Teachers College in the mid 80's as we offered a concentration in cross cultural counseling at both the masters and doctoral level. Attendance at the Roundtables had grown from our initial 75 or so to levels in excess of 250 participants with a concomitant growth in the budget, scale and scope of the conference. I can safely say that virtually anyone of prominence in the field of cross cultural counseling has participated in one or more of the Roundtables over the last ten years.

Internal to Teachers College, the Roundtable continued to have beneficial effects. Students in Higher Education, Developmental Psychology, Clinical Psychology, International Education came forward and expressed interest in conducting dissertations on cross cultural issues. More than 15 dissertations had their conceptual beginnings with the Roundtable programs. Graduate students from all over the country began to express interest in studying at the College to pursue work in the area. All of these effects combined to underwrite the continued development of the Roundtable as an annual event. The College and the Department of Social, Organizational and Counseling Psychology were becoming nationally recognized as a focal point for programs, training and research in cross cultural counseling.

New and Recent Developments

In the fall of 1987, I left Teachers College to serve as Dean of Students at Baruch College of the City University of New York. For that year I maintained my commitment to convening the conference while I was off site. 1988's Roundtable was larger than ever. It drew a diverse national audience of participants and clearly had developed a measure of stature and prestige consistent with its evolution. The following year Dr. Robert T. Carter, a friend, colleague and former TC student, assumed an assistant professorship at Teachers College and became co-convener of the Roundtable. His addition to the planning group made substantial impact on the scale and scope of the conference.

Dr. Carter's goal was to take the Roundtable to a higher level of stature and prominence by going aggressively after national participation, marketing the program to department and training centers around the country. He also suggested the important addition of competitive review of submissions and the Janet Helms Award. Dr. Carter's leadership has resulted in an exponential growth in the participation in the Roundtable by leading scholars, practitioners and trainers. Since 1988, attendance at the

Roundtables has exceeded 300 participants. It has evolved into an event of national prominence with a reputation for quality and relevance among those in the field.

Today the Roundtable stands as the model program we all hoped it would be. It has become an institution at Teachers College and in the hearts and minds of those of us in the field. This year we are publishing the proceedings for the first time. It is our sincere hope that the proceedings will become as popular and useful as the Roundtables themselves. The development of the Roundtables has the potential to become a case study in the evolution of an educational enterprise. We will conduct the review of the historical documents on file to complete the case study that this brief history initiates. I am thrilled to have been a part of the process. I am also indebted to all of those participants who have supported the Roundtables over the course of the last ten years. Thank you all. I look forward to seeing you at this year's conference.

References

Johnson, S. D. (1983). The Minnesota Multiethnic Counselor Education Curriculum: The design and evaluation of an intervention for cross cultural counselor training. (Doctoral dissertation, University of Minnesota, 1981). *Dissertation Abstracts International.*

Racial Identification and Feminism: A Synthesis of Perspectives for a Focused Group Intervention

Margaret M. Walker
Counseling and Mental Health Center
The University of Texas at Austin

The relationship of race and gender is a salient issue for college age women in a multiracial environment. Because the meaning of race and gender is often neither taught nor learned in any obviously conscious way, identification as women of color may become a process that is, at best, fraught with ambivalence, and at worst, mired in shame. Effective negotiation of this developmental issue requires examination of those interpersonal dynamics that impede healthy, satisfying resolutions. A central task then, for persons shaping interventions to support healthy development is to uncover factors and processes that amplify the ambivalence-shame experience.

Setting forth a model of healthy human development is a useful starting point for such an examination. To this end, theories which emphasize the importance of racial identity and gender variables provide potent conceptual underpinnings. Notable among these are the writings of the Stone Center psychologists and the research of the racial identity theorists. Representative of the gender literature is the work of Jean Baker Miller (1986), whose theories of mutual psychological development provided the cornerstone for the new feminist perspectives in psychology. Likewise, Janet Helms (1990) offers compelling documentation of the influence of racial identity development on social and psychological functioning. Interestingly, while the gender and racial identity theories pose significant challenges to the classical literature, they are broadly compatible with both organismic and psychosocial theories of human development.

According to Miller (1986), an inner sense of connection to others is a central feature of women's psychological development. That is, women's sense of self and of worth becomes organized around the ability to move and maintain relationships. This quality of connectedness both enables and is enabled by mutuality of interest, of empathy, and of empowerment (Miller, 1986). It is within this context of connectedness and mutuality that self-knowledge and self efficacy develops. Self-empowerment as a benefit of healthy interpersonal connections has been a classic theme in psychological literature across theoretical perspectives. Miller (1986) explicates this theme by specifying a stronger and more knowledgeable feeling-thinking base as the primary outcome of mutuality and connectedness. For example, a healthy connection is established when one's right to own feelings-thoughts is validated by expressed interest and empathy rather than disaffirmed through contradiction or neglect. It is precisely this feeling-thinking base that enables intentionality and flexibility in relationships with others. Because mutual connection involves attunement to the interior world of feeling-thoughts, lost or impaired connection may be experienced as lost or impaired self.

This viewpoint is consistent with the Eriksonian explanation of ego identity. Erikson (1950) defines ego identity as the accrued confidence that the sameness and continuity experienced internally are matched by the sameness and continuity of one's meaning for others. Again, the translation of this developmental task from the realm of theory to the world as experienced by young women of color requires exploration of the influence of gender and racial identity variables on psychosocial adjustment.

Understanding the influence of sociocultural variables is a part of the legacy of Karen Horney. It was she and other neo-analytic theorists who made explicit the deleterious effects of growing up within a hostile environment. Following this line of thought, mental health professionals and lay pundits alike developed hypotheses about the influence of race and ethnicity on personal development. Most of these hypotheses, however, were deficit-based and resulted in what Helms (1990) labels client-as-problem (CAP) models. One of the deficits underlying these approaches was inadequate conceptualizations of healthy racial identity. Laying the ground work for a strength-based model, Helms (1990) theorizes that quality adjustment of various developmental junctures results from a combination of personal identity, reference group orientation, and ascribed identity.

Within this framework, personal identity includes the cognitions, feelings, and behaviors which impel more generic personality processes such as anxiety or self-esteem. Reference group orientation refers to the extent to which racial groups guide cognitions, feelings and behavior. Presumably, such orientation will exist at all levels of consciousness. Ascribed identity, on the other hand, refers to conscious and intentional commitment to a particular racial group. One of the developmental implications of this model is that the more sophisticated modes of identification enable effective adjustment in a multiracial world. From this background of racial identity development theory, two meta-issues stand out clearly: (1) that psychological health models developed without regard for racial identity variables are incomplete; and (2) that it is possible to both identify and measure correlates of healthy racial identity development.

Over the past decade, the actualization stages of racial identity models have been variously defined and labelled. For instance, Miller (1980) and Banks (1981) use the terms globalism and integration to indicate more highly evolved levels of identification. Earlier, the term Internalization-Commitment was prominent in the literature (Cross, 1971). In a subsequent elaboration on the Cross model, Helms (1984, 1989) emphasized the possibility for diverse behavioral manifestations of each level of development. In spite of the apparent differences in the abstract formulations, common themes underlie the behavioral concomitants of each stage. In the case of actualized racial identity, internalization of an Afrocentric world view and commitment to human dignity stand foremost. Such development implies not only self affirmation but social activism as well. That African American women have demonstrated this level of consciousness is born out by striking examples in history. An often cited case is that of Harriet Tubman, whose commitment to confronting oppression included the enfranchisement of women as well as humanitarian efforts in behalf of the elderly and the infirm. The importance of healthy connection, both as an interior experience and as an external reality, is integral to this developmental stage.

Because that connectedness is a powerful variable in racial identity development it is essential to examine both interpersonal transactions and systemic factors that influence the process. On a more operational level, the question to be addressed is how does the fact of race alter the experience of connectedness. It has been suggested that for African American women, the fact of race may transcend the effects of gender (Greene, 1990). The existence of differential valuing, expectations of, and expectations for black and white women, accounts for some of the diversity of experience around connectedness and other developmental tasks. For example, while all women are subject to the debilitating effects of white male dominance, African American college women have the additional pressure of coming of age within a culture that devalues Blackness as well. Moreover the promise of care and admiration used to justify gender oppression is not extended to African American women. In fact their very blackness has exempted them from this "protected" status. Therefore, developmental tasks common to college women must for African American women include certain racial tasks, as these females are not simply seen as women, but rather as Black women. The premise of connected development can be helpful in understanding the salience of racial tasks as they are experienced, but not always articulated by African American college women. Such understanding offers clues regarding not only the etiology and manifestations of counseling issues but suggests interventions for support and resolution as well.

To gain an overview of etiological factors, it is useful to describe the college environments in which many African American women must function. The relative health of a multiracial environment is observable in the extent to which racial diversity is viewed as normal and desirable. In such an environment, mutually empowering connections can develop. However, in a society that automatically confers entitlements based on whiteness and maleness, persons not conforming to those norms may experience the ambivalence or shame that comes with doubting the worth or acceptability of who they are. At the core of the ambivalence is disconnection.

Kaufman (1989) describes this disconnection as the rupture of an interpersonal bridge. In discussions of relationship as a fundamental human need, Kaufman (1980, 1989) identifies the condition of mutuality as the sine qua non of healthy connection. That is, expressed interest in the experiential world of another conveys that the relationship is genuine, is valued, and is wanted. On the other hand, relationships in which the dominant figures are unresponsive or demeaning toward experience may induce in the nondominant person feelings of worthlessness and undesirability. Compounding the injury of disconnection is the likelihood that the nondominant person will feel at fault for not belonging.

While Kaufman's developmental theory of shame is focused primarily on dyadic transactions, the relevance of his work to larger systemic transactions can be easily discerned. In essence, this reframe involves exploring the phenomenology of racial identity when the agent of disconnection is the dominant culture. As in more directly personal relationships, the messages of disconnection may be blatant or subtle, transitory or on-going. The reactions generated may range from puzzlement to shame. A brief example may illustrate this point. A common recruiting procedure on multiracial campuses is to entice prospective students with glossy brochures describing campus organizational life. The African American student, however, may find access restricted by unwritten racial quotas. For instance, if the leader of a theatre group wishes to avoid a "too ethnic" appearance (translation: a white numerical majority is both normal and desirable), the ability and enthusiasm of an African American may go unrecognized or devalued. The promise of inclusion is countered by the reality of rejection. Reactions to the exclusion will undoubtedly vary based on a number of interactive factors. What is more certain is that the felt disconnection will help to shape her perceptions of who she is, how she is valued, and what that valuing portends for future relationships.

Miller (1986) theorizes that repeated occurrences of disconnection may result in relationship impoverishment, as the person is denied the possibility of learning from action within relationship. Under these circumstances, racial identity development tasks may be complicated by limited access to the kind of learning that provides clarity and knowledge about self and others. It is somewhat predictable then, that certain core themes will shape the racial identity tasks of young African American women. Although the following thematic outlines are not at all exhaustive, they do represent prominent issues for young women of color.

Racial Development Themes

Connection with the physical self

Being dark with short kinky hair means knowing you'll never be the Christmas Fairy no matter how good you can fly. — Participant, First Annual Conference of National Black Women's Health Project Inc., Atlanta, Georgia, June 1983

1955

On the first day of school, six year old Dianne stood in line with her new classmates, nervously waiting for the teacher who would usher them into a new world. After a beaming, "Good morning boys and girls," the teacher's smiling attention went to a little brown-skinned girl whose long Shirley Temple curls were held in place by bright, crisp ribbons. "Oh. I see we have beautiful Dolly Dimples with us," exclaimed the teacher. "Class, we'll let Dolly Dimples get in front of the line and lead us all in. " On that first day Dianne learned that with her darker skin and short braided hair, her place in line would always be behind Dolly Dimples.

1987

Dianne's daughter Cheryl was a tall, striking young woman with broad facial features and unabashed smile. Dianne often thought how beautiful her daughter could be if she would only find a hairstyle that would "lift" her features, especially her brow and nose. Dianne would also insist that Cheryl's eyes would be much more attractive if she would only tame those bushy eyebrows. In fact, much of the tension between the mother and daughter grew out of Dianne's constant efforts to "improve" Cheryl's appearance. Cheryl noticed that her mother's intrusions lessened somewhat when she pointed out that Brooke Shields, too, had thick eyebrows.

Dianne's first day of school might have been aptly titled Elementary Lessons in Self Devaluation. What she learned and subsequently taught her daughter is that physical appearance is a primary determinant of how the environment responds to African American women. While all women have been oppressed by male defined standards of beauty, African American women are devalued by the European imperative as well. That is, in order to be deemed acceptable, they must strip themselves of their Black racial features. To the extent that they approach the standards of whiteness, they are judged acceptable. To the extent that they share characteristics of Blackness, they are deemed inferior.

No doubt, standards of beauty which are both external and devaluing affect the development of racial identity. It is an unfortunate aspect of this culture that women are responded to based on their appearance, rather than their skills, interests, and abilities (Greene, 1990). With more than acceptable frequency, the overwhelming message is that how they look is the most important part of who they are. According to television and print advertisement, how women look determines not only happiness in relationships, but success in the market place as well. As if this message were not of itself sufficiently toxic, African American women receive the add on that how they look is fundamentally wrong. These messages are all the more toxic for their prevalence and subtlety. They can serve to disconnect the women from the larger culture and from her inner self, as she begins to doubt the adequacy and rightness of her body.

It is clear from the preceding examples that Dianne's unresolved issues about physical appearance affected her ability to facilitate healthy racial identity in her daughter. It is certainly not inevitable that her daughter will have a shame-based identity: however, it is obvious that like herself, Dianne's daughter must function within a shaming environment. Consider, for example, the language that young Dianne would have heard about her own and Dolly Dimple's appearance. It would be typical for Dolly Dimple to be described as having "good" hair, while Dianne's shorter, kinky hair would be "bad." As if to support the fantasy that some moral imperative is attached to hair, there are numerous anecdotes (too many to be discounted) about youngsters with "good" hair getting better grades, being punished less often, and being chosen for the little daily honors that signify adult approval. Such positive affirmation is less often the automatic entitlement of Dolly Dimple's counterparts. It is more likely that the Dianne's in the first grade would have had to overcome the negative response their appearance elicited from adults, and would have to prove their acceptability through hard work and model behavior. In either case, the lessons learned by Dianne and Dolly are the same: (1) that affirmation and worth are conditional upon physical appearance; and (2) that Black racial appearance is bad; i.e., will elicit disconnective responses from adult models.

While African American children in 1950's classrooms were bombarded with disconfirming messages through Dick and Jane serials, it is important to recognize that such messages were also delivered through important role models with their own unresolved racial identity development issues. Rather than blatant disconfirmation, contemporary college women are more likely to have their own racial identity tasks impeded by older adult models with unresolved issues. In other words, internalized Eurocentric values sometimes belie the wearing of kinte cloth and dreadlocks. For these young women, the messages are more insidious for their ambiguity. For example, Dianne provided her daughter with books of black poetry, attended black feminist workshops with her and pressured her to camouflage her black racial features. One conceivable outcome of such confusing messages is significant ambivalence regarding the physical aspect of Black racial identity. On some level of consciousness, the young woman hears that until she "corrects" her racial features, she is barred from the role of Christmas Fairy.

Connection with the feeling-thinking self

We grow tired but must always be soft and not too serious...
not too smart not too bitchy not too sapphire
not too dumb not too not too not too
a little less a little more
add here detract there
lonely.

Caroline M. Rodgers
how i got ovah

Just as African American women learn that certain physical traits draw disconnective responses from the environment, they also learn that certain feelings are likely to be met with disconfirmation. Greene (1990) acknowledges that all women are discouraged from expressing feelings, but because of certain myths African American women may become hypervigilant around particular feelings. One of these is anger. Consider, for example, the case of Marian, a fourth year college student seeking help with stress management. On campus Marian is known as a activist for African American concerns. At home, her middle class family is highly regarded in their community, where both parents teach and her father practices an active ministry. Some of her earliest memories involve learning to sit through long church meetings without complaint and being required to give up some of her favorite clothes and toys as a gesture of sacrifice for the needy. When Marian became pregnant during her second year in college, her parents immediately demanded that she get an abortion, so as not to undermine the family's status in the community. Aware of her role in the respectability script, Marian acquiesced. A special irony of her situation is that had she not been a family member, her parents would have demonstrated more openness to her needs. She had learned at an early age, however, not to inconvenience her family with her own dependency needs and not to mar the image of family unity by her expressing frustration around not having those needs met. Doing so would result in her being shamed as selfish. As Marian worked in counseling, it became clear that she had been involved in several disappointing relationships, which invariably ended with her feeling shamed and abandoned. However, with the exception of occasional explosive outbursts, Marian was careful to maintain a semblance of friendship with her errant partners. In Marion's family, the drive for status and respectability seemed to fuse with cultural mandates to serve the less fortunate. While service, unity, and respectability are laudable ends, the means by which they were achieved required denial of feelings, especially anger. Eventually Marian learned not only to protect herself from others' awareness of her anger, but to ward off the internal experience as well. Because there was no external connection in the object world, Marion's anger turned inward. Greene (1990) identifies displacement and ambivalence as likely results of this process, and asserts that the client must understand the issue as internalized racism.

Perhaps no myth so perpetuates disconnection from feelings as that of the Black Superwoman. Hailed in both family histories and popular culture alike, this icon has provided inspiration and pride for African American women over the centuries. However, as Wallace (1978) points out in *Black Macho and the Myth of the Superwoman*, to be regarded as superhuman often translates into being treated as subhuman. In other words, there is no external connection for feelings of vulnerability, neediness, and sadness. Young women whose family and cultural histories prescribe Strong Black Woman as the predominant role often are reluctant to seek counseling. Frequently, this script is grounded in admonitions to (1) be independent; (2) trust no one/man; and (3) be twice as good as the rest. For such women, needing help may be seen as evidence of failure, and failure in any endeavor equals worthlessness. Patrice, for example, remembers well the praise she received for her high school heroics : getting excellent grades, winning talent awards, and "never acting foolish about boys." In fact, she seemed to fit perfectly into the role of Real-Smart-Girl-Who-Never-Gave-Her-Parents-Any-Trouble. Because her connection with others developed around gaining their admiration, she was able to show only her most perfect face in relationships. When Patrice tried to communicate her fears or confusions to the adults in her life, she was rebuffed with reminders of their expectations of her. Not only would she experience the troubling emotions, but the shame of disconnection as well. Miller (1986) describes this process as the collection of inappropriate or disproportionate affects. The original affect, in Patrice's case fear, gets cluttered with guilt and anger when her attempts to get support are invalidated. With her vulnerable voice effectively silenced, Patrice begins to keep more and more of herself out of relationships. Under these circumstances, she has no opportunities to experiment, and her relationships lack the spontaneity and authenticity required for intimacy.

Disconnection in the form of repudiated feelings is a form of internalized oppression. For adults to justify that disconnection by invoking a cultural or racial legacy further impedes racial identity development and influences the affective tonation of the self. The development of role self (e.g., Strong Black Woman) can lead to a situation in which major aspects of the self are denied or denigrated. Because she has been explained by others to herself, Patrice must use counseling to find her own voice. Through relationships that enable respectful attunement with self and others, she may experience connection and empowerment.

Cultural Marginality

Whites won't believe I remain culturally different.
Blacks won't believe I remain culturally the same.
—— Leanita McClain, *Newsweek*,
October 13, 1980

It is generally acknowledged that a reliable barometer of mental health is the extent to which a person claims her own voice. Giving voice to needs, feelings, and values in relationships with others enables the process of healthy self definition. Voice is pre-requisite to intentional action. That identity process to likely to go awry, however, when one's personal voice becomes subservient to words or reactions used by the dominant others to discredit self perception and to innervate self efficacy. When the dominant culture is the agent of this disconnection, the racial identity process may become disorganized around issues of cultural affiliation. This outcome is particularly predictable when there is internalized identification with dominant expectancies to the disparagement of one's own cultural experience (Greene, 1989). Disconnections from feelings, language, perceptions and values can lead to lack of self continuity. This internal disorganization is a core dynamic of persons stuck in the more naive stages of racial identity development. Identifying this dynamic is never simple, as the issue may be camouflaged by apparent productivity and professions of self pride. It is conceivable that such a person may be characterized by any of the earlier stages of the Cross (1971) racial identity model, from Pre-encounter to Integration. The case of Rhonda, a first year student from rural South Carolina, exemplifies the experience of persons mired in pre-encounter development. When Rhonda arrived on her large multiracial campus, she was careful to divest herself of all clues of her Black southern background. She attempted to cultivate friendships with whites, "because it was easier to relate to them." Her cultural makeover included not only changing her diet, but also taking every opportunity to let people know that she didn't eat "that so-called soul food." Her taste in music went from rhythm and blues to pop/rock, and she even tried to affect a Southern drawl. Rhonda's greatest fear was that she would be seen by others as "just an ordinary Black person." The extent to which she stripped herself to gain entry into a fantasied white world left her culturally and emotionally homeless. While students like Rhonda may feign popularity and satisfaction with their newly ascribed identities, their lack of inner direction and cohesion cripples their efforts to function effectively in relationships. Identification with the dominant culture obstructs racial identity tasks in less blatant ways as well. Caroline, for example, functions in organizations with people from many racial and cultural backgrounds. Her primary social network, however, is the campus Black Student Alliance. She is knowledgeable of her own family and cultural history and takes pride in sharing it with others. Since her arrival on campus two years ago, she has maintained an impressive academic record. In spite of these apparent accomplishments, Caroline often feels angry and sullen. While exploring her anger in counseling, she acknowledges feeling deeply shamed by other African Americans who function less well than she. Therefore, she frequently finds herself playing the role of "model minority" to compensate for the presumed inadequacies of her race. What Caroline does in the world is often very worthy action, but that action does not fully connect with her experience of herself as a racial person. It is as if she only hears the dominant voice which has defined her as the "exception to the rule." In other words, she has come to believe that her achievement is made possible by her ability to suppress her racialness. To the extent that she cannot connect her doing to her being, she cannot build an image of herself as worthy (Miller, 1988).

A special racial identity issue for young women of color is their particular vulnerability to selective affirmation. From a very early age, they learn the rudiments of ethnic culture at home and the crazy-making double standards of social acceptability outside the home (Boyd, 1990). Learning to comply publicly with the dominant culture is not so much a choice as a survival strategy. The adaptive value of this strategy is evident. Nevertheless, the process is fraught with certain racial dangers. As the young woman learns that only parts of herself will be affirmed in various contexts, she runs the risk of developing an identity comprised of fragmented roles, few or none of which may connect with her internal experience. Her actions come from what she believes she must do to be allowed into connection with others, and more and more of herself is denied or distorted in the process. Because their giftedness has been affirmed and has gained them entry into the dominant culture, African American college women have the special task of disentangling their own strengths from the sometimes dehumanizing expectations of others. Otherwise they are subject to a marginalized existence or what Collins has called "the outsider within" phenomenon. This experience is probably not unlike that described by Harriet Tubman as she entered the free world: "There I was in this land of freedom, but there was no one there to welcome me. I was a stranger in a strange land." Because multiracial academic communities continue to value white and male experience as the standards for what is normal and desirable, young women of color may experience themselves as outsiders, or they may attempt to alter their self-definition so as to be acceptable in an unaccepting environment. With support for and purposive exploration of their own racial identity process, African American women may experience the empowerment and affirmation that comes with connection.

Focused Group Intervention

A focused group based on feminist and racial identity development perspectives can provide a potent developmental intervention for African American college women. College counseling centers have a distinctive opportunity in this process, as the past decade has yielded sufficient research to support translating the values of feminism and nigrescence into models for change. That groups may be the method of choice is supported by many considerations. First, these women enter college without the level of cultural cueing available to their grandmothers and mothers. The messages of disconnection are not as clearly obvious. Such generational differences often result in disparate expectations; however, the differences in their socialization are usually more apparent than real. Therefore, these younger women must negotiate developmental tasks which remain in large part ambiguous. This ambiguity is ameliorated by a group in which the exploration of racial identity is guided and purposive. In fact, racial issues may be undercurrents in any developmental group. If these issues are left untended, the ambiguity of the developmental task is exacerbated and can contribute to group dysfunction (Helms, 1990). Second, groups provide a welcoming context for reactivation of voice and consciousness. Social influence research seems to indicate that the dominant culture needs to exert very little active influence to mute the consciousness of persons in nondominant positions. As one attempts to develop in opposition to the prevailing culture, it is difficult to believe that one is right or that one has rights (Boyd, 1990). Racial memories get suppressed, and racism begins to look normal. To counteract all this, a community of like people is essential. Third, group context presents the possibility for connection. The importance of connection is amplified in racial identity developmental tasks, as one component of racial oppression is the training of nondominants to be intolerant and judgmental toward each other. This process disconnects women of color not only from their own experience, but from each other. They are thus denied the sense of community as a source of comfort and nurturance. They are also denied the opportunity to hear their own voices as they resonate with those of their racial sisters. It is through the process of connected voice that racial memories are stimulated and clarified. A fourth consideration in the development of a group intervention is that shame issues are best resolved in the context of relationships (Harper and Hoopes, 1990). Because disempowerment results in some level of shame, healthy progression through developmental stages is thwarted. As shame issues are resolved, identities can change. It is important to emphasize that these issues are not manifestations of pathological persons, but are special developmental challenges created by pathological systems.

According to Drum and Lawler (1988), it is precisely these types of challenges that are most amenable to change through developmental interventions. The levels of change possible through developmental interventions are compatible with the racial identity tasks suggested by the Cross (1971) nigrescence model. Change may be effected by (1) raising awareness, (2) increasing self and other understanding, (3) increasing response flexibility, and (4) working through the problem (Drum & Lawler, 1988). A fifth level, developing a capacity for proactivity, is necessary to fully support the progressions implicit in the racial identity development models. These progressions represent the effective negotiation of racial tasks—tasks which in large measure become distorted in reaction to disconnection. Miller (1986) defines these reactions as grossly compounded reversals of the benefits that flow from mutually empowering connections. The specific reversals are impediments to racial identity development: (1) distorted internal images of self and others; (2) altered internal images of the nature of connection between self and others; and (3) denial and disconfirmation of personal experience. Additional consequences are attempts to alter self to maintain connection with dominant culture and isolation. These levels imply certain broad goals in the development of an intervention for college women of color. Primary among those are increased knowledge of self, to include thoughts, feelings and actions which are influenced by unconscious forces. A second broad goal is increased capacity to articulate experience within the context of relationship. Third, the intervention must enable skills development to support empowered action within relationship. The purpose of these goals is to recognize that there exist certain core themes among African American women, and a diversity of experience around those themes. An additional principle underlying the goals is recognition that all experience cannot be retained at a conscious level. Therefore, effective developmental interventions must target submerged belief, their impact on current feelings and actions, and must purposively resculpt those beliefs to reduce their constraining forces (Drum et al., 1988).

Fortunately, the nomenclatures of racial identity stage models allows for behavioral translation for both clients and counselors. Using the underlying constructs as guides, group leaders may generate hypotheses testable within the context of the group. Problematic issues are thereby discernible, even when they are unarticulated by group members. This process of bringing issues into consciousness is of itself a specific goal of the intervention. Furthermore, it is suggestive of additional strategies needed to resolve the issues. For example, Barrett (1990) asserts that the value of the Encounter and Immersion themes cannot be overstated in the self-valuation process. Countering the internalized oppression of a larger society is almost impossible to do alone. Separate time, space, and energy with members of a like group allows an individual to see herself positively and clearly. A context of connectedness is of itself a structural intervention necessary for effective resolution of long submerged issues.

A focused group intervention supports the rearticulation of consciousness that may have been previously shamed into silence. A further extension of this intervention is skills building for response flexibility within a context which will continue to offer confusion and disconnection. For this reason, focused groups remain a viable option for persons at all levels of racial identity development. Barrett (1990) observed that once a sense of Integration or Commitment is reached, time alone with other group members is essential to health. For persons at this developmental stage, time with the group offers respite—a place to be out of view of a hostile dominant culture. Additionally, their participation in group affords them a place to rejuvenate and to reinforce a common sense of clarity and connection.

An effective focused group provides the flexibility for attention to process issues, as well as the structure needed for exploration of core identity themes. Certain design principles underlie the content of each session. For example, ample consideration must be given to desired behavioral, affective, and cognitive outcomes, as well as to the psychosocial and cognitive development of all persons involved. Although particular identity issues may serve as a thematic overlay for the intervention as a whole, session content may include topics predetermined by the designers as well as those identified in collaboration with the participants. Irrespective of the method and timing of these determinations, each session must be developed in accordance with stated design principles; that is, exploration of the issues must be purposive and facilitate racial development processes through connected experiencing. Following is a sample session on the issue of micro aggressions (Pierce, 1970)..

Sample Session: Two Hours

Microaggressions

Process Goals

1. To inform participants about group process by modeling and teaching skills that promote connectedness.
2. To reduce anticipatory anxiety by explaining procedures, ground rules, and expectations.
3. To encourage participants to share their experiences of self-in-relation to dominant cul-

ture, especially around processes/events of microaggression.

4. To explore unaddressed and/or unspoken feelings—thoughts related to hurtful experiences within a multiracial culture.
5. To facilitate experience of connection and caring within the context of racial identity development.

Content Goals

1. To explore the concept of microaggression as a way to give voice to experiences of disconnection within a multiracial context.
2. To examine the effects of microaggressions on the developmental processes of African American college women.
3. To share experiences including feeling and behavioral reactions to instances, processes of microaggressions.
4. To gain access to unacknowledged feelings, thoughts and behaviors as outcomes of microaggression issues.

Activity 1 : Introductions and Check-in

1. Leaders begin each session by sharing appreciations for the energy and emotional investments of the participants and disclosing some of their responses to the previous group meeting.
2. Leaders ask participants to share their feeling-thoughts about being in group today and ask them to respond to the following stem sentence: "Since the last session of this group I have been more aware of ... "

Leader Process:

To minimize emotional attending and listening at a deeper level, leaders ask participants to engage in emotional attending and listening with minimal verbal responding. Where appropriate , leaders may explain that verbal and content-focused responding is often at the cost of allowing us to really hear what is being expressed at deeper levels by the other person (Vasquez, 1991). Leaders will model this response skill as one which fosters self-to-self and self-to-other connectedness.

3. Leaders inform participants about the content of session, briefly describing content and goals.

"Today we will be exploring experiences called microaggressions. We will examine the impacts of these experiences on our daily functioning. We will also take a close look and share what happens inside us when we have these experiences. We will also begin to develop some skills helping us to feel more empowered under these circumstances."

Activity 2

Leader Content

Being an African American woman on a predominantly white campus means that you will have issues that non-minority people will not have. Your sense of belonging and connectedness on this campus is probably challenged in many small ways on a daily basis. For example, the student who worked closely with you on a class project may ignore you when she/he sees you out of class. Or your teacher may express surprise that you're actually making good grades in calculus. Such experiences sometimes have the effect of making us question how and if we can relate to and be valued by other people. Because these events are usually not blatantly racist, we often end up questioning our own perceptions: Does what I feel check out with the reality of what really happened? Can my feelings be trusted? Am I being too sensitive? Am I okay? Usually, we feel incapable of taking effective action because we don't have a strong enough feeling-thinking base to stand on. In other words, we are afraid that our reactions are unjustified or at the very least carry great risk. Carrying these feelings around drains psychological energy and reduces our ability to produce and feel effective in the world. A word that is used to describe these experiences is microaggressions (Bowles, Personal Communication, May 16, 1990). They are those multiple, little assaults on the ego, that are directly related to racial identity. Over time they begin to impose a "racial survival task" in addition to the other academic and developmental tasks of college life. One of the dangers of racial microaggressions is that nonminority people will not experience them and are therefore often unwilling to acknowledge their existence. Too, some people of color have learned to adapt by denying the impacts on their own lives. It is hard, then, to find someone to connect with in order to work through the issues.

Leader Process:

Solicit comments from group to clarify content, questions, etc.

BEST COPY AVAILABLE

Activity 3

1. Leaders will inform participants that they want them to remember instances of "microaggressions" in their own lives.
2. Leaders will use relaxation procedures to begin guided imagery exercise. After inducing relaxation, the leaders will say:

> "Think about a time when you felt but weren't very sure that someone was ignoring you, excluding you, or otherwise belittling you because of your race.
>
> What happened? Remember where you were, who was there watching, who actually participated in this experience? ...
>
> How did you respond? What did you do?
>
> And what did you feel ... Allow yourself to be aware of what was happening inside you?
>
> And what else did you feel?
>
> And how did your inner feelings match with your outer behavior?" Which part of you got silenced during the interaction? Let your silenced voice "speak to you now."

3. Leaders will guide participants out of imagery exercise and encourage them to take time to reflect on the exercise.
4. Leaders will instruct participants to use newsprint posted on the walls to draw a symbol of their experience with microaggression.
5. Participants are asked to form small groups of 2-3 to discuss their symbols and process reactions to the exercise.

Activity 4

Leaders ask participants to form a large group to accomplish three objectives :

1. To process the small exercise (Ex. "What was it like to share with other group members?")
2. To brainstorm other examples of microaggressions
3. To identify consequences of and typical reactions to microaggressions
4. To identify common themes across the varied experiences

Activity 5: Leader-Group Discussion

This portion should be highly interactive with group participants and leaders exchanging and exploring insights around racial experiences. There are, however, key concepts that the leaders should introduce.

1. One way people of color avoid the racial tasks imposed by microaggressions is to "go unconscious." Parts of the feeling self go denied or denigrated to maintain connection with a dominant culture which limits possibilities for connection. The denial of one's authentic feeling self allows racial wounds to fester and can lead to discontinuity with self and others. The leaders might emphasize that disowning parts of the self both indicates and amplifies feelings of shame.
2. The ambivalence surrounding the events and the resulting feelings of entrapment and powerlessness are normal. However, failure to give voice to feelings is collusive with the process of disconnection.
3. Draw out feelings and beliefs that underlie the "need to be sure" before responding to microaggressions. Emphasize that the "need to be sure" allows microaggressions to go uninterrupted.

Activity 6: Assertion Skills and Reaffirmation of Support

1. Leaders may use appropriate communication model to teach assertion skills for responding to racial microaggressions. The objectives for applying the models must be clearly relevant to the context of identity development.
2. Leaders will emphasize that self knowledge and validation is prerequisite to effective assertions. While the values of venting must be affirmed and supported as part of the developmental process, participants must be guided from a focus on "they" to attunement to "you." The leaders may explain, where appropriate, that the effectiveness of microaggression relies on keeping the object more attentive to the other, thereby disempowering the self.
3. Leaders may present appropriate sentence maps for responding to microaggression in an interpersonal context.

Example: "When _________ happened, I felt ______; I want ______; I need to let you know that _______ . . ."

4. Leaders ask participants to form groups of 2 or 3 to discuss a current microaggression issue. The group members will then role play the situations and coach each other in developing effective responses. Each participant must be allowed to process feelings and thoughts associated with new response.
5. Leaders call the large group together to process remaining concerns and questions.
6. Following brief closure remarks drawing on common themes and connections within the group, leaders begin a closure imagery exercise. Participants are guided to the original microaggression scene, and instructed to change their response based on new skills gained and the growing sense of connectedness experienced in the group. Imaging sequence should conclude with references to courage and empowerment.
7. Participants are again asked to reflect on their experience, return to the newsprint and draw a new symbol of empowerment.
8. In large group leaders will process reactions to the session in its entirety and express appreciation for the work done in the group.

Other Recommendations

As an intervention for African American college women, the focused group can be designed to facilitate tasks pertinent to racial identity and gender development. There are numerous, productive topics compatible with this format. Such topics might include the following: "Woman Legacy: Self in Relation to Mothers and Grandmothers," "Power and Intimacy: Self in Relation to Significant Others," "Explaining the Father-Daughter Connection" (Vasquez, 1991); and "Finding My Place: The Tasks of Biculturality." Other topics might be determined by various formal and informal assessments. It is recommended that phenomenological and empirical methods be used to examine the salience of racial and gender issues and their impacts on the developmental processes. Information generated by these inquiries can fortify the conceptual bases of interventions which enhance empowerment and connection.

References

Barrett, S. E. (199). Paths toward diversity: An intrapsychic perspective. In L. S. Brown & M. P. P. Root (Eds.), *Diversity and complexity in feminist therapy* (pp. 41-52). Binghampton, NY: Harrington Park Press.

Boyd, J. A. (1990). Ethnic and cultural diversity: Keys to power. In L. S. Brown & M. P. P. Root (Eds.), *Diversity and complexity in feminist therapy* (pp. 151-167). Binghampton, NY: Harrington Park Press.

Collins, P. H. (1990). *Black feminist thought: Knowledge, unconsciousness, and the politics of empowerment.* Boston: Unwin Hyman.

Drum, D. J., & Lawler, A. C. (1988). *Developmental interventions: Theories, principles, and practice.* Columbus, OH: Merrill.

Greene, B. A. (1990). What has gone before: The legacy of racism and sexism in the lives of black mothers and daughters. In L. S. Brown & M. P. P. Root (Eds.), *Diversity and complexity in feminist therapy* (pp. 207-230). Birmingham, NY: Harrington Park Press.

Harper, J. M., & Hoopes, M. H. (1990). *Uncovering shame: An approach integrating individuals and their family systems.* New York: W. W. Norton.

Helms, J. E. (Ed.). (1990). *Black and white racial identity: Theory, research and practice.* New York: Plenum Press.

Kaufman, G. (1985). *Shame: The power of caring* (2nd ed.). Rochester, VT: Schenkman Books.

Kaufman, G. (1989). *The psychology of shame: Theory and treatment of shame-based syndromes.* New York: Springer.

McClain, L. (1980, October 13). The middle class black's burden. *Newsweek*, 21.

Miller, J. B. (1986). *Toward a new psychology of women* (2nd ed.). Boston: Beacon Press.

Miller, J. B. (1986). *Connections, disconnections, and violations.* Paper presented at Stone Center Colloquium, Wellesley, PA.

Pierce, G. M. (1990). Offensive mechanisms: The vehicle for microaggressions. In F. Barbour (Ed.), *The Black seventies.* Boston: Porter Sergent.

Vasquez, M. J. T. (1991). *Counseling Hispanic women.* Unpublished manuscript.

Wallace, M. (1978). *Black macho and the myth of the superwoman.* New York: Dial Press.

ADULT TRANSRACIAL ADOPTEES AND RACIAL IDENTITY: IMPLICATIONS FOR COUNSELING

Jana Goldsmith and Kevin Wickes

Ball State University, Muncie, Indiana

Transracial adoption occurs when children of one race are placed with families of another race. Transracial adoption became an acceptable alternative to adopting a White child during the mid-1960's and since then has increased. White children are difficult to adopt, oftentimes requiring a lengthy waiting period. On the other hand, many Black and Biracial children are in need of adoptive families. There are a number of controversial issues, however, associated with this practice. Smith (1988) addresses several of these issues. Can White families provide the Black child with adequate coping mechanisms to defend him/herself against a racist society? Is it crucial to provide the Black child with a home and family membership, thereby avoiding foster care, regardless of whether this entails that racial boundaries must be crossed?

During the 1960's, commitment to racial integration grew and transracial adoptions were thought to reflect those interests. However, in 1972, the National Association of Black Social Workers (NABSW) stated that Black children should not be placed in White families for reasons of cultural genocide, institutional racism and Black identity issues (NABSW, cited in Smith, 1988). Their position was that Black children placed in White homes would become alienated from their own culture and immersed in the White culture. Additionally, institutional racism was thought to occur because the White community continued to ignore the Black community. This segregation prevented adoption agencies from actively seeking Black families to adopt Black children. White agencies claimed that there were few Black families able to adopt because their socioeconomic status often disqualified them from becoming adoption candidates. The NABSW found this line of reasoning unacceptable. Finally, Black children reared in White families were believed to be unprepared to cope with racism and were not given an adequate opportunity to develop racial identity (NABSW, cited in Smith, 1988).

Since 1972, transracial adoption has been the focus of an increasing volume of research. Although much of the research reports positive outcomes of transracial adoption, there are findings that suggest that transracially adopted children may be prone to racial identity problems (e.g., Smith, 1988). Small (1984) described two case studies of adoptees who have suffered great anguish over their racial identity and who have developed psychopathology. A three year old Black girl who had been transracially adopted had an aversion to Blacks and was observed attempting to scratch off her skin. A two year old Black boy who was transracially adopted also tried to scratch off his skin and later experienced several other psychological disorders.

Racial identity problems not exclusively stemming from transracial adoption have been reported. In a classic study by Clark and Clark (1940), it was reported that Black children reared in their biological homes also experience racial identity confusion at an early age. This was evident when children three years of age were given eight requests while being shown both a White and Black doll that include "Give me the doll that: (a) is the nice doll, (b) is a nice color, (c) looks like you." Results indicate that 67% of the Black children preferred White dolls, 59% responded that the White doll was the nice doll, and 60% chose the White doll as having a nice color (Clark & Clark, 1940). Powell-Hopson and Hopson (1988) employed the Clark doll test to Black children reared in Black homes and reported that Black children were developing negative racial identities.

In a related study, Shireman and Johnson (1986) administered the Clark doll test to transracially adopted children at the ages of four and again at eight in an effort to determine consistency of racial identity. The results indicated that racial identity remains constant for transracially adopted children who display a greater Black doll preference than the traditionally adopted children in homes with Black parents at age four. At age eight, children in homes with Black parents had increased their preference for the Black doll, thereby developing similar preferences as the transracially adopted child. Therefore, it appears that more research is needed about racial identity in Black children reared in Black homes, since Black children in Black homes may also develop negative racial identities. Simon's (1977) findings support this research. It was found that Black children who were transracially adopted perceived themselves as Black similarly to White children's perceptions of themselves as White. However, Simon (1977) stated that it is difficult to predict if this sense of Black identity will continue into adulthood. The lower preference for the Black doll found among Black children in Black homes as well as those in White homes may be due to several societal factors (Peterson-Lewis & Adams, 1990).

Exploratory studies describe the environments in which transracially adopted children are reared and also the attitude of the adoptive parents. Many transracially adopted children are reared in predominantly White neighborhoods that provide few Black role models. One study (McRoy, Zurcher, Lauderdale, & Anderson, 1984) reported 87% of Black adoptees were residing in neighborhoods where 0 to 10% of the population was comprised of Black residents, and 73% of Black adoptees were enrolled in predominantly White schools.

Given Black adoptees' lack of exposure to other Blacks, there is concern as to whether these adoptees will be culturalized similarly to other Blacks. Although these adoptees may possess the intellectual knowledge of their heritage, they are exposed to different developmental patterns of racial identity as compared to Black children reared in Black homes (Johnson, Shireman, & Watson, 1987). Without affiliation and exposure to other members of their race, transracial adoptees may not develop a positive sense of racial identity, but instead gain a distorted perception of members of their race.

The racial development of transracial adoptees may be determined by individual differences of adoptive families. Verma and Bagley (1979) concluded that there is not a typical parenting profile. Families who adopt transracially may do so for extremely different reasons and may hold dissimilar attitudes about Blacks. Some families may have Black friends while others may not provide any exposure to Blacks for the adoptees. A central issue for adoptive parents is the emphasis dedicated to racial identity (McRoy, Zurcher, Lauderdale, & Anderson, 1984). While some families place importance on individual qualities and disregard the child's Black identity, others will incorporate Black racial identity into the child's life. Children who were not given a sense of racial identity did not view themselves as Black (McRoy et al., 1982).

In addition to racial identity confusion, Black adoptees residing in predominantly White communities often are confronted with racial prejudice. In comparison, Black adoptees reared in integrated neighborhoods had a positive sense of racial identity (McRoy et al., 1984). These unique factors contribute to the complexity and nature of researching transracial adoptees. Small (1984) made some suggestions designed to encourage development of a more positive racial identity development in transracial adoptees. First, seek out an area to live where the child will come into contact with other Blacks, thus reducing feelings of isolation and lack of positive role models. Second, socialization will provide positive interactions with others who do not hold negative attitudes about Blacks. Third, the ability to adjust and remain aware of how stresses may occur both inside and outside the home due to the race of the adoptee, providing opportunities to learn to handle such situations in a manner that helps the transracial adoptee to cope in a positive manner. Finally, pay attention to the school life of the adoptee, including attitudes of teachers, other children, and families of other students, and expectations the school system has for the Black adoptee. Ladner (1977) reported that developing a positive Black racial identity for transracial adoptees is important. Furthermore, parents who adopt transracially should be sensitive and aware of their own prejudices and racism as well as provide exposure to an equal number of Black people as White people.

Racial identity, thus far, has been presented as a feeling regarding one's race. A positive racial identity describes one who feels positive about being Black. Negative racial identity, therefore, is thought to occur when one feels negatively toward his/her race. Cross (1971, 1978), however, theorized a four-stage process which occurs in the development of a Black racial identity. The first stage, Preencounter, provides a White frame of reference for viewing the world; the accompanying attitudes are Pro-White and Anti-Black. The second stage, Encounter, is explored when the individual is confronted by a situation in which he/she experiences prejudice and thereby revaluates his/her perception of the world and its relation to the self. If the individual doesn't return to his/her previous belief, then he/she will become dedicated to developing a Black identity. Third, the Immersion-Emersion stage attempts to negate the White experience and belief system by finding everything worthwhile in a Black frame of reference. Anti-White attitudes may emerge, while simultaneously declaring all that is Black is good. The final stage, Internalization, is achieved when an individual retains a positive Black frame of reference, but develops a bicultural perspective. Feelings of security and confidence increase. Parham (1989) extended Cross' model, proposing that Blacks will recycle through the four stages at various phases of their lives. Late adolescence/early adulthood, middle adulthood, and late adulthood are times at which stages can be reexperienced and recycled.

Helms (1984) expanded racial identity to include a White racial identity. White racial identity is composed of five stages. The first stage, Contact, is characterized by the belief that people are people and a person operating in this stage will be color blind and deny differences between races. The second stage, Disintegration , occurs when a White person acknowledges that Black racism exists. He/she either chooses not to advocate racist attitudes and become alienated from other Whites, or chooses to deny Black racism in effort to conform to White racial norms. The third stage, Reintegration, is characterized by anti-Black attitudes. During this stage, if a person accepts his/her "Whiteness" and understands his/her anger and fear of White racism and the Black culture, then he/she may enter the next stage. The next stage, Pseudo-Independent, is marked by an intellectual acceptance of cross-racial interactions. In order to move into the final stage, however, a person also needs to have an affective understanding of the Black culture. This most commonly occurs through relationships with Black people. In the final stage, Autonomy, a person will be aware of Black and White cultural norms and understand cross-racial interaction. He/she will also seek out opportunities to involve him/herself with others in the Black culture and will appreciate cultural diversity.

Poston (1990) expanded racial identity models to include individuals with a multiethnic heritage. This developmental model emphasizes a multicultural racial identity. Poston proposed that a biracial individual may cycle through five stages. During the first stage, Personal Identity, an individual's identity stems from a self-identity independent of a specific heritage. During the second stage, Choice of Group Categorization, an individual is persuaded to make a choice of one race that he/she will identify him/herself as belonging to this race. In the third stage, Enmeshment/Denial, the individual experiences an emotional reaction resulting from the decision to associate him/herself with one race, consequently alienating another race. Confusion and guilt are typical reactions to this choice. During the fourth stage, Appreciation, the individual may continue to identify with one race, but take an interest in cultivating cultural experiences. An individual in the fifth stage, Integration, will find worth in all of his/her ethnic heritages and develop an integrated racial identity.

Racial identity has been researched in transracial adoptees while they are children. Future studies are needed that measure transracial adoptees' racial identity when they reach adulthood. Based on Cross' (1971, 1978), Helms' (1984), and Parham's (1989) findings, the Racial Identity Attitude Scale can measure racial identity. The Racial Identity Attitude Scale may be one means to measure racial identity of adult transracial adoptees. The transracial adoptee, however, may have additional experiences that supplement these racial identity stages. For example, if a transracial adoptee is in the Immersion-Emersion stage and holds pro-Black, anti-White attitudes, how will this affect relationships with his/her adoptive family?

The question raised by the majority of transracial adoption research regards the development of a positive racial identity. The answer seems to lay in the adulthood of the transracial adoptees after their immersion into a larger society. For this reason, future studies should seek adult transracial adoptees for research purposes. In the meantime, adoption agencies who make transracial adoption placements need to screen applicants for qualities that enhance a positive racial identity in children who have been transracially adopted. The White Racial Identity Attitude Scale may be one instrument that can determine racial identity of adoptive parents that is most likely to facilitate the development of a positive racial identity of the transracial adoptee. A positive racial identity needs to be established during childhood in effort to possess a positive racial identity in adulthood.

Helms' (1984), Cross' (1971, 1978), and Poston's (1990) models of racial identity may also benefit transracial adoptees who seek counseling. When a counselor is aware that a client he/she is counseling is transracially adopted, the counselor may explore the issue of racial identity. If a client decides that racial identity is a presenting problem for him/her, there are several racial aspects to consider. In an effort to gain knowledge of the client's personal racial experiences, an assessment of the client's past may be helpful to attain crucial information. For example, below are some questions that may uncover the client's psychosocial/racial background. This is only a brief list; you may want to generate other questions of your own.

1. What was the racial composition of his/her neighborhood growing up? Now?

2. What was the racial composition of the client's peers growing up? Now?

3. Did his/her family associate with may people of other races?

4. What were parental attitudes about people of his/her race?

5. What were familial attitudes about people of his/her race?

6. What were parental attitudes about people of other races?

7. What were family attitudes about people of other races?

8. What were political attitudes of the family, especially where social policies affecting the client's race were concerned?

9. What current attitudes does he/she hold about members of his/her race?

10. What have been his/her experiences with racism?

This information will help to provide a racial identity profile from racial identity models. The counselor's goal should not be to push the client along to the last stages in racial identity such as Integration. Rather, the goal should be to guide the client to a place where the client achieves a sense of satisfaction and comfort with his/her racial identity. Listening to the client's experiences, educating the client about racial identity and its impact on self-identity, and encouraging the client to actively explore cultural activities are inclusive to the counselor's role.

Both the counselor's and the client's present racial identity profile become a function of effective therapy for counseling in general (Helms, 1984) and with this population. Helms (1984) developed counseling dyads demonstrating how racial identity of both counselor and client can facilitate or hinder treatment. More specifically, it appears that Pre-Encounter clients should be matched with a White counselor. Encounter clients should be matched with a Black counselor. Immersion/Emersion clients should be matched with a Black counselor. Internalization clients should be matched with either a Black or White counselor. Counselors in Contact, Disintegration, and Reintegration should not counsel a transracial adoptee. Counselors in the Pseudo-Independent and Autonomy stages can be matched with a client who has been transracially adopted.

In reviewing the stages, it becomes evident that a counselor's limited or broad perspective of race and racism will impact the client. For example, if a client had an Immersion/Emersion profile and was assigned to a White counselor, hostility and anger may emerge, resulting in a lack of rapport development. If a client had an Immersion/Emersion profile and was assigned to a Black counselor, however, and the counselor had a racial identity stage either of Immersion/Emersion or Integration, then rapport would likely be established quickly and the counselor may also provide a positive role model for the client.

Racial identity should be a consideration with counselor/client dyads generally. When counseling with a transracial adoptee who declares racial identity to be an issue, additional situations should be considered. It appears that transracial adoptees would experience racial identity stages somewhat differently than a Black individual reared in a Black home. For example, if a transracial adoptee has a profile emphasizing that he/she is in the Immersion/Emersion stage, how does this individual cope with negative attitudes toward his/her own family members? Or does the transracial adoptee have specific unique characteristics typical of this stage? Future research may implicate how the transracially adopted individual's racial identity is impacted by being raised in a White family. Current research provides a framework to answer additional questions concerning the transracial adoptee.

REFERENCES

Clark, K. B., & Clark, M. P. (1940). Skin color as a factor in racial identification of Negro preschool children. *Journal of Social Psychology*, S.P.S.S.I. Bulletin, 2, 159-169.

Cross, W. E. (1971). The Negro to Black conversion experience: Towards a psychology of Black liberation. *Black World, 20*, 13-27.

Cross, W. E. (1978). The Cross and Thomas models of psychological Nigrescence. *Journal of Black Psychology, 5*, 13-19.

Helms, J. E. (1984). Toward a theoretical explanation of the effects of race on counseling: A Black and White model. *The Counseling Psychologist, 12*(4), 153164.

Johnson, P. R., Shireman, J. F., & Watson, K. W. (1987). Transracial adoption and the development of Black identity at age eight. *Child Welfare, 66*, 4555.

Ladner, J. A. (1977). *Mixed families*. New York: Anchor Press.

McRoy, R. G., Zurcher, L. A., Lauderdale, M. L. ,& Anderson, R. E. (1982). Self-esteem and racial identity in transracial and inracial adoptees. *Social Work, 17*, 522526.

McRoy, R. G., Zurcher, L. A., Lauderdale, M. L., & Anderson, R. E. (1984). The identity of transracial adoptees. *Social Casework, 65*, 3439.

Parham, T. A. (1989). Cycles of psychological Nigrescence. *The Counseling Psychologist, 17*, 187226

Peterson Lewis, S., & Adams, A. (1990). Television's model of the quest for African consciousness: A comparison with Cross' empirical model of psychological Nigrescence. *The Journal of Black Psychology, 16*, 5572.

Poston, W.S. (1990). The biracial identity development model: A needed addition. *The Journal of Counseling and Development, 69*, 152155.

PowellHopson, D. & Hopson, D. S. (1988). Implications of doll color preferences among Black preschool children and White preschool children. *The Journal of Black Psychology, 14*, 5763.

Shireman, J. F. & Johnson, P. R. (1986). A longitudinal study of Black adoptions: Single parent, transracial, and traditional. *Social Work, 31*, 172176.

Simon, R. J., & Alstein, H. (1977). *Transracial adoption.* New York: Wiley.

Small, J. W. (1984). The crisis in adoption. *International Journal of Social Psychiatry*, 129142.

Smith, J. (1988). *Transracial adoption: Success or failure?* Address given at the Dr. Martin Luther King Colloquium.

Verma, G. K., & Bagley, C. (1979). *Race, education and identity*. New York: St. Martin's Press.

Racial Identity Research on Asian Americans and American Indians: Is Racial Identity Misplaced or Forgotten in the Literature?

Eric L. Kohatsu
University of Maryland

Lisa A. Suzuki
University of Nebraska-Lincoln

Sandra K. Bennett
University of Oklahoma

The purpose of this paper is to critically review some of the empirical and theoretical work done on Asian Americans and American Indians involving racial identity development. Generally, these two racial/ethnic groups have not been addressed in any comprehensive manner in the field of racial identity research, both in terms of theory and empirical testing. Too often, racial/ethnic identity development has been mistaken to be or substituted for the psychological work done in the area of acculturation. In order to address this "underrepresentation" in the racial identity field, this paper will critically examine racial identity research with Asian Americans and American Indians and offer recommendations for future work.

Another related rationale for this paper is to bring together diverse perspectives on racial identity theory as it applies to Asian Americans and American Indians. One impetus was provided by the following peer reviewer's comments to a major methodological article on racial identity:

> It appears that only a small cadre of researchers is involved in racial identity research. Many of the researchers are students (or past students) of Helms and Parham, and therefore the probability exists that many of these researchers are operating from a similar attitudinal and conceptual base, or "school of thought," if you will. Clearly, it would benefit scientific work in the area if other scholars, of varying geographical regions, and of varying racial/ethnic backgrounds, would be involved in this research endeavor (Ponterotto, 1989, p. 268).

In response to that published review, each section in this paper represents a different view and aspect of racial identity theory culled from the joint work of three researchers from different parts of the country. Hopefully, this creative endeavor will stimulate further reflection, debate, and empirical study of racial identity as it applies to Asian Americans and American Indians.

Part one will provide an overview and context for this paper. In addition, some of the problems encountered in racial identity research with Asian Americans will be discussed. The results of an exploratory study that dealt with a component of racial/cultural identity theory, namely philosophical orientation/world view, will be briefly summarized. The study examined the relationship between philosophical orientation/world view and race on the conceptualization of mental health problems among Asian American and White college students.

Part two will entail an analysis of the implications of research on racial identity and acculturation for Asian Americans. Acculturation and racial identity will be analyzed in reference to the cross-generational perspective within Asian American families. Hence, the focus of part two will be on racial identity and acculturation issues, and contextual/environmental variables as evidenced within the Asian American family system.

Lastly, Part three will involve an exploration of the implications of racial identity theory for American Indians. Racial identity development for American Indians will be discussed from the perspective of cultural competencies. In addition, recommendations for future empirical work will be offered, as well as implications of racial identity theory for counseling and counseling research with American Indians.

Part One: Problems in Racial Identity Research

In conducting a critical review of the racial/ethnic identity research on Asian Americans, a number of problems that pervade the research have emerged. Although the following points may be rather obvious, no researcher has heretofore written a comprehensive statement of the "trends" in racial identity research on Asian Americans. One predominant pattern in the literature is the confounding and/or confusion between racial identity development and acculturation. That is, rather than studying the developmental process of racial identity, most researchers in the past have tended to look at acculturation issues. In short, acculturation has frequently been equated as being synonymous with racial/ethnic identity. Confounding racial/ethnic development with acculturation has only obscured the complex processes of racial/ethnic identity development among Asian Americans. Although each variable does interact with the other, it is suggested that acculturation and racial/ethnic identity development are somewhat separate processes. In order to empirically test racial identity development among Asian Americans, it would be beneficial to treat acculturation as a separate variable.

Moreover, the variable termed "acculturation" itself needs to be operationally redefined or reconceptualized, and measured in a more sophisticated manner. Recent advances in acculturation theory particularly with Hispanics (e.g., Keefe & Padilla, 1987; Szapoznik, Santisteban, Kurtines, Perez-Vidal, & Hervis, 1984) could be adapted to more clearly examine the process of acculturation among the different Asian American ethnic groups. In addition, in order to reconceptualize acculturation a multidimensional, not linear, approach could be employed (e.g., Keefe & Padilla, 1987). Lastly, most emprical studies addressing acculturation among Asian Americans have employed the same scale (Suinn-Lew acculturation scale; Suinn, Rickard-Figueroa, Lew, & Vigil, 1987), which was based on the scale developed for Hispanics in 1980 (Cuellar, Harris, & Jasso, 1980). The Suinn-Lew scale has good psychometric properties, yet may be outdated in light of the more multidimensional approach now being adapted in acculturation research.

In conjunction with this problem of confounding/confusion in variables, the research on Asian American racial/ethnic identity has been adversely affected by the lack of theoretical developments or refinements of the existing models. For example, over the space of 20 years, only 3 models of racial/ethnic identity have been published (Atkinson, Morten, & D. W. Sue, 1989; Kitano, 1982; S. Sue & D. W. Sue, 1971). It is interesting to note that the Kitano (1982) and Sue and Sue (1971) models are both typologies and are not process and/or developmental. However, a number of dissertations have been done in recent years that have either offered a model/theory of racial/ethnic identity development and/or conducted an empirical test of a particular model/theory (e.g., Kim, 1981; F. Lee, 1991; S. Lee, 1988). Unlike the published works, most of these dissertations offered a developmental/process model and not a typology. It is clear that the dearth of research on Asian American racial/ethnic identity provides partial evidence that the theoretical and empirical richness found in the Black racial identity literature has not been incorporated or spurred on similar research with Asian Americans.

Further, this lack of research is also apparent in the lack of empirical testing of the relatively scarce number of racial/ethnic identity models and theories that are available. A fairly discernable line of demarcation can be drawn — several studies using an ethnic identity variable were done in the 1970s (e.g., Matsumoto, Meredith, & Masuda, 1970) and virtually no published empirical studies during the 1980s-1990s. The exception is that a number of dissertations have been done in recent years that have conducted some empirical work with racial/ethnic identity development, in some fashion, among Asian Americans (e.g., S. Lee, 1988).

The outcome of this dearth of research is that there have been relatively few efforts to produce empirical measures of the existing models/theories of racial identity. Indeed, there are no adequate scales in existence that have established psychometric properties at best, or, there have been no additional studies using these existing scales at the least. However, there are some promising exceptions, such as S. Lee's (1988) Asian American Cultural identity scale and F. Lee's (1991) Asian American Ethnic Identity scale.

A Case in Point: Philosophical Orientation

In light of the above mentioned problems in the field of racial identity research on Asian Americans, a case example will highlight the usefulness in incorporating such variables in cross-cultural psychological studies. An important caveat is that the proceeding discussion will briefly summarize an exploratory study that examined a unique aspect of world views, namely philosophical orientation. As Helms (1990) suggested, world views impact the personal identity (PI) and reference group orientation (RGO) dimensions, as well as an individual's racial identity (cf. Cross, 1987). Although the study to be discussed did not address these dimensions specifically in reference to racial identity theory, the study does have implications for further empirical work in that area. It is suggested that philosophical orientation is a PI-type variable.

A study was conducted by Kohatsu (1990) under the supervision of Dr. Janet E. Helms. Briefly, this study explored the impact of both a "distal" (race) and "proximal" (philosophical orientation/world view) variable on the conceptualization of mental health problems among Asian American and White college students (see Sue & Zane, 1987, for discussion of proximal and distal variables). Conceptualization of mental health problems was defined as the extent of somatization and preferences for help-giving sources.

An anonymous questionnaire was administered to a random sample of Asian American and White university students. The measures used were the Eastern/Western orientation scale, Mental health locus of origin scale, preferences for help-giving sources, and a demographic data sheet. Gender and ethnic breakdown of the Asian American sample were as follows: 24 males and 36 females (n=60); 80% Chinese, 17% Japanese, 3% Mixed. For the White sample: 25 males and 35 females (n=60); 42% Anglo-Saxon, 30% White ethnic, 7% Socio-Religious, and 13% Mixed White.

Preliminary analyses of the data consisted of a series of Oneway Analyses of Variance for each of the dependent measures across six groups, which were created by using gender, race, and birth (U.S. vs foreign-born) as the grouping variables. In addition, a series of multiple regression equations were conducted, using race, gender, philosophical orientation, and birth as primary predictor variables.

Briefly, the results of the primary multiple regression analyses were as follows. First, both a Western and Eastern orientation were significant predictors of somatization. The greater one subscribed to a Western orientation, the higher the rate of somatization. Likewise, the more one subscribed to an Eastern orientation, the higher the rate of somatization. Essentially, both types of philosophical orientation were more predictive of somatization than race or gender. Second, birth and the interaction of birth and gender were significant predictors of a Western orientation. Hence, being foreign-born and male predicted a stronger Western orientation, whereas being U.S.-born and female predicted a weaker Western orientation. Third, neither race, gender, Eastern and Western orientation, birth, and interaction terms were significant predictors for professional and nonprofessional sources of help for both Asian Americans and Whites.

There are a number of implications of the Kohatsu (1990) study for the discussion in this paper. To reiterate, philosophical orientation was more predictive of somatization than race and gender. This result demonstrates the usefulness of a within and between group variable; that is, philosophical orientation did prove to be a proximal-type variable. Moreover, philosophical orientation could be classified as a PI-type variable (e.g., Helms, 1990), although RGO, world views (PI), and racial identity do interact (see Helms' psychodiagnostic model; Helms, 1990). The primary implication is that world views, RGO variables, and level of racial identity development do appear to interact and that cross-cultural studies would benefit from incorporating such variables in empirical studies.

Further, foreign-born Asian American males tended to subscribe both to a strong Western and Eastern orientation. Kohatsu (1990) interpreted such a result as evidence of Asian American males embracing a bicultural identity. Maintaining both a Western and Eastern orientation may have been a functional way for Asian males to survive and deal with a racist White system. Accounting for the influence of acculturation and racial/ethnic identity may have gleaned more information about this bicultural aspect of Asian American males.

Kohatsu (1990) postulated that racial category would be the primary factor in differentiating between participants' inclination to either a Eastern or Western philosophical orientation, but the results of the study did not support such a hypothesis. This suggests that Kohatsu (1990) did not account for acculturation among both Whites and Asian Americans. That is, Asian Americans appeared to be "acculturated" in that they conceptualized the world in terms consistent with Western rather than Eastern religions. Cross-cultural researchers have tended to ignore the impact of religious/philosophical orientation among Asian Americans. Constructing a empirically-derived profile of this component of an Asian American world view can only add to the greater understanding of this racial/ethnic group. For example, how does level of acculturation and racial identity affect or is affected by philosophical orientation, particularly an orientation that is White?

Conclusion

Given the large influx of recent Asian American immigrants, the effects of the model minority myth, racism, poverty, and significant emotional/psychological problems, researchers will have to pay more serious consideration of racial/ethnic identity theory with Asian Americans. Racial/ethnic identity is an important variable to study, as it has important implications and applications for counseling/psychotherapy with Asian Americans. On a more general level, understanding the developmental process of racial/ethnic identity among Asian Americans will add to the basic fund of knowledge regarding the psychological functioning of Asians in this country. Conducting such research will undoubtedly redress the covert implication that Asian Americans do not suffer from the effects of racism, prejudice, and discrimination as do other ethnic minority groups.

Further, a cautionary note is that in recent years cross-cultural/multicultural issues have become buzzwords; hence, the danger of creating a "bandwagon" effect with regards to racial identity research becomes real. One recommendation would be to methodically and systematically build upon the existing empirical and theoretical research base in the areas as previously outlined. Psychologists would benefit greatly from collaborative work with scholars from other disciplines, such as anthropology. Further, psychologists could advance this research area by incorporating recent developments in developmental, social, and ethnic psychology, as well as anthropology and sociology.

Part Two: Transgenerational Issues in Asian American Families

Racial identity, acculturation, and assimilation may be examined within the context of transgenerational issues in Asian American families. The "family" represents one of the primary vehicles through which patterns, such as acculturation are communicated and reinforced. Asian American family patterns have been linked to Buddhism and Confucianism. As Shon and Ja (1982) note:

> Buddhism and Confucianism in their contemporary forms are, for example, derived from common experiences in early periods of religious and political exchange. This has led to many similarities in family structure (p. 182).

As Sue and Sue (1985) note, however, it is important to remember that there are differences within each Asian American group as they pertain to acculturation, generational status, and socioeconomic level. Therefore, these differences may be reflected in the family.

Three generational processes/systems are relevant to the examination of transgenerational issues in families (Troll, Bengtson, McFarland, 1979). They are as follows: a) generations of family lineage, b) generations as developmental levels, and c) generations as age cohorts within a social system. Each of these processes/systems will be discussed briefly in reference to Asian American family systems, prescribed family roles and rituals.

Generations of family lineage

This system refers to the ascendant-descendant chain of grandparent, parent, child, etc. Within the Asian family system, honoring one's ancestors is often valued as evidenced in ancestor worship practices. For example, as McGoldrick (1982) notes, "The Chinese include all their ancestors and descendents in their definition of family" (p. 71). This definition has implications in view of racial identity development and issues related to acculturation and/or assimilation.

Generations as developmental levels

This process refers to the developmental grouping of individuals into life stages — e.g., childhood, adolescence, adulthood. Each life stage has been termed a unique "generation." Traditional views of socialization indicate that family influence is often primary during early childhood with peer group influence increasing over time.

The Western orientation of individualism, independence, assertiveness, and freedom of choice is often particularly attractive to Asian youth. In addition, McGoldrick (1982) notes that family systems change given the time at which families immigrate and the adjustment of the younger family members to American culture differs depending on their age. For example, young adults have the greatest potential for adaptation to a new culture, however, they are perhaps the most likely to give up their heritage. By doing so, young adults are vulnerable to cultural isolation at later phases of the life cycle. Moreover, if the family migrates with small children or teenagers, parents will often acculturate more slowly than their children leading to a "problematic power reversal in the family."

> If the children must take on the task of interpreting the new culture for their parents, parental leadership may be so threatened that children are left without effective adult authority to support them and without a positive identification with their ethnic background to ease their struggle with life in this new culture...Thus the family must struggle with multiple transitive and generational conflicts at once . . ." (McGoldrick, 1982, p. 84).

In this researcher's experience these struggles have occurred among recent Asian immigrant families, especially those families experiencing economic crises in adjusting to the new environment.

Generations as Age Cohorts Within a Social System

This process does not refer to the family or individual directly, but instead focuses on the wider social context. People born at the same time who experience comparable historical and cultural circumstances and similar socialization are considered an age cohort (Troll, Bengtson, McFarland, 1979). For example, in relation to families, Japanese Americans who grew up during the internment period as a cohort group probably treat their children differently from those who grew up before or after World War II.

Figure 1 schematically illustrates how these three systems/processes impact Asian American families. Understanding transgenerational issues are important in examining racial identity, acculturation, and assimilation. These themes will be addressed in view of the ritual practices and roles adopted by members of the family.

Many of the ritual practices and roles in Asian families are influenced by classical philosophical and religious influences which have permeated Asian cultures for centuries and is reflected in the Asian family structure. In particular, according to the Confucian system, the quest for fulfillment is to achieve and maintain harmony in the world and in this life through observation of the five basic relationships of society: such as older and younger siblings, parent and child, etc. These five relationships demand obligation, loyalty and respect.

Family roles

Based on these Asian cultural perspectives, roles within a family are explicitly prescribed. For example, in "traditional" families, the mother is often described as the caretaker and nurturer. Strong emotional attachments are formed between mother and children which helps to insure that the wishes of the mother will be fulfilled by the children. Filial piety is the

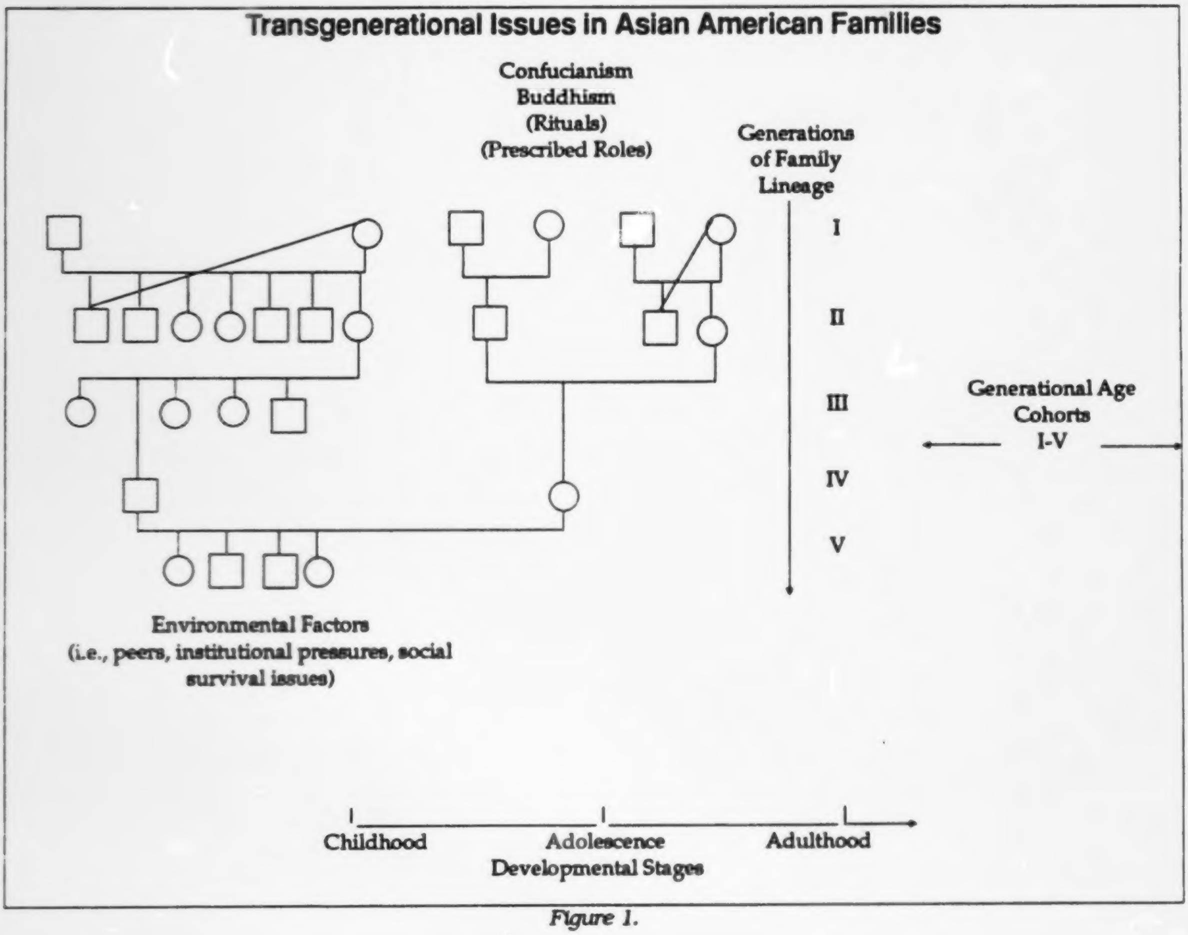

Transgenerational Issues in Asian American Families
Confucianism
Buddhism
(Rituals)
(Prescribed Roles)
Generations of Family Lineage
I
II
III
IV
V
Generational Age Cohorts I-V
Environmental Factors (i.e., peers, institutional pressures, social survival issues)
Childhood
Adolescence
Adulthood
Developmental Stages

Figure 1.

primary way in which loyalty is demonstrated in the parent-child relationship (Ho, 1987).

The concept of shame and loss of face can also be applied to family roles. As Shon and Ja (1982) note, "the individual is superseded by the family" (p. 209). Thus, while Western philosophies note individual selection of destiny, self sufficiency, and individualism, the Asian world view emphasizes that "people are products of their relationship to nature and other people" (p. 213). Thus, phrases such as "shikata ga nai"- that's the way it is, endure it; go with the flow — are often passed on from parent to child. The term "Tui lien" (Chinese) is a concept which traditionally is used to "reinforce familial expectations and proper behavior within and outside the family" (Ho, 1987, p. 25). The role of the eldest son (or eldest daughter if no son is present) is to serve as a role model and authority figure to younger siblings.

Family relationships and social relationships are reciprocal and obligatory. The obligation is often unspoken (Shon & Ja, 1982) and develops out of two types of circumstances: 1) the relationship ascribed by hierarchical roles in status or 2) through acts of kindness or helpfulness. Understanding of these relationships is important because direct confrontation is often avoided whenever possible.

Ritual

As Rosenthal and Marshall (1988) note one of the primary functions of ritual is to provide a "symbolic connection to the past and to the future..." (p. 669). Ritual is one way in which ethnic heritage and identity are preserved and also the way in which change and continuity are interwoven as family systems are modified through acculturation.

For example, due to economic hardships after immigration, Japanese families established a ritual known as "tanomoshi" in which each family contributes money to a common "pot." The family with the greatest need is given the money. It is assumed that at different times each family will receive money from the "tanomoshi." Thus, this community ritual reinforces Asian cultural values and social structures, such as a collective group identity. It is this collective group identity that interacts with racial identity.

Conclusion

The tenuous relationship between racial identity, acculturation, and assimilation is further complicated when examining these concepts in the transgenerational family context. While writers have alluded to the assimilation of particular generations of Asians into the American culture (Ho, 1990; Kitano & Daniels, 1988), i.e., sansei Japanese Americans, this researcher would argue otherwise. In consideration of the complexities of the transgenerational family system, development of modified rituals over time, and changing family roles in response to environmental pressures, the issue of assimilation is inconclusive at best. As noted earlier in this panel, the constructs of racial identity, acculturation, and assimilation, have not been empirically documented in the literature with respect to Asian Americans. Transgenerational family variables also need to be examined in the context of these theories and constructs.

Part Three:
Racial Identity and American Indians

Racial/ethnic identity theory dealing with American Indians has, to date, been confined to the development of discrete typological categories or linear stage models. Even the most recent model, "orthogonal cultural identification theory" (Oetting & Beauvais, in press), provides distinct identification categories into which individuals may be placed. Further, earlier models (i.e., Carroll, 1978; Chance, 1965; Lowrey, 1983) seemed to reflect acculturative status rather than racial identity per se. While acculturation is dependent on contact with a dominant culture, racial identity seems to be a more complex construct that encompasses and is dependent on a variety of factors. The models that address racial identity as acculturation are perhaps overly simplified and may, in fact, measure acculturative status rather than racial identity. Therefore, the problem of differentiating acculturation versus racial/cultural identification is problematic.

Further, difficulties may lie in the conceptual basis of these early theoretical efforts. Typological models categorize individuals into different types; hence, they imply a more static or stable quality to racial identity than is likely to exist. As Trimble (1991) notes "One's identification with an ethnic group is not static or immutable. It can and does change over time as a function of varied circumstances and social contexts" (p. 161). If this is indeed the case, then the existing racial/ethnic identity models for American Indians which do not account for such fluctuation have limited utility.

Given the history of oppression of the American Indians in this country, there seems ample evidence that adaptation to changing situations has become a necessity for this racial/ethnic group. Generally, anecdotal evidence provides support for the notion that individuals vary their behavior depending on the social context, as well as the strength of their racial/ethnic identification. It is suggested that this is the case for the American Indian.

Indian people have adapted, not always willingly, to a society whose values are different from their own. Within the context of this process of adaptation, they have also shown remarkable resiliency in maintaining a core of traditional cultural values and beliefs. Thus, the American Indian functions in two worlds — his or her native world and in the world of the dominant White culture. The strength with which Indian people identify with American Indian and other cultures may be a product of the interaction of their particular social environment and the level of competence with which the individual functions within that environment.

Counseling Implications

The implications of this particular point of view are particularly relevant when considering counseling. Many authors in the field of cross-cultural and multicultural psychology have underscored the importance of counselors' sensitivity to their own level of racial identity and to the client's (e.g., Helms, 1990). In considering racial/ethnic identity as a dynamic force, counselors must be willing to broaden their conceptualization of the client to include the strength and level of racial/cultural identity the client exhibits in different situations. The initial interview might include questions touching on a variety of areas, such as individual and family values, friends, language, cultural participation, and self-reported racial/ethnic identification, as well as the standard psychosocial history.

Further, if one accepts that racial identity may be fluid across situations and that social competence may be an important factor in determining the strength of identification, then it becomes important to assess presenting problems in light of this variable. Thus, some problems may reflect an incongruence in the client's racial/cultural identification with his or her competence in a particular social context, rather than simply some type of emotional difficulty.

Lastly, the existing theories of racial/ethnic or cultural identification for American Indians have provided useful information and represent initial steps in the development of this research area. It seems important, however that racial/ethnic identity theory account for differing identification in differing situations. Therefore, a suggestion for future research is the development of a more dynamic theory of racial/ethnic identity for American Indians.

Conclusion

Has racial identity been misplaced or forgotten in the literature? In light of the discussion presented in each of the three distinct sections of this paper, the answer to the former half of the question is "yes." Research on racial/ethnic identity development among Asian Americans and American Indians needs to be redirected, and the recommendations provided in this paper hopefully provides some direction. Cross-cultural researchers can make full use of this important area if some of these problems are addressed. In regards to the latter part of the question, the answer is probably "hopefully not." Racial/ethnic identity has important implications and applications for Asian Americans and American Indians; hence, it would be a tremendous loss if such a research area was not fully explored with these two racial/ethnic groups.

References

Atkinson, D. R., Morten, G., & Sue, D. W. (1989). A minority identity development model. In D. R. Atkinson, G. Morten, & D. W. Sue (Eds.), *Counseling American Minorities* (pp. 35-52). IA: W.C. Brown.

Carroll, R. E. (1978). Academic performance and cultural marginality. *Journal of American Indian Education, 10*, 11-16.

Chance, N. (1965). Acculturation, self-identification, and adjustment. *American Anthropologist, 67*, 372-393.

Cross, W. E. (1987). A two-factor theory of Black identity: Implications for the study of identity development in minority children. In J. S. Phinney & M. J. Rotheram (Eds.), *Children's ethnic socialization: Pluralism and development* (pp. 117-135).

Cuellar, I., Harris, L. C., & Jasso, R. (1980). An acculturation scale for Mexican American normal and clinical populations. *Hispanic Journal of Behavioral Sciences, 2*, 199-217.

Helms, J. E. (1990). *Black and White racial identity: Theory, research, and practice.* Westport, CT: Greenwood Press.

Ho, M. K. (1987). *Family therapy with ethnic minorities.* Beverly Hills, CA: Sage Publications.

Ho, M. K. (1990). *Intermarried couples in therapy.* Springfield, IL: Charles C. Thomas, Publisher.

Keefe, S. E., & Padilla, A. M. (1987). *Chicano ethnicity.* New Mexico: University of New Mexico Press.

Kim, J. (1981). The process of Asian American identity development: A study of Japanese-American women's perceptions of their struggle to achieve positive identities as Americans of Asian ancestry. *Dissertation Abstracts International, 42*, 1551A. (University Microfilms No. 81-18010).

Kitano, H. L. (1982). Mental health in the Japanese American community. In E. E. Jones & S. J. Korchin (Eds.), *Minority mental health* (pp. 149-164). New York: Praeger.

Kitano, H. H. L., & Daniels, R. (1988). *Asian Americans emerging minorities*. Englewood Cliffs, NJ: Prentice Hall.

Kohatsu, E. L. (1990). *The impact of philosophical orientation and race on the conceptualization of mental health problems among Asian American and White college students*. Unpublished manuscript, University of Maryland, College Park.

Lee, F. Y. (1991). *The relationship of ethnic identity to social support, self-esteem, psychological distress, and help-seeking behavior among Asian American college students*. Unpublished doctoral dissertation, University of Illinois, Urbana-Champaign.

Lee, S. R. (1988). Self-concept correlates of Asian American cultural identity attitudes (Doctoral dissertation, University of Maryland, 1988). *Dissertation Abstracts International, 49*, 12B.

Lowrey, L. (1983). Bridging a culture in counseling. *Journal of Applied Rehabilitation Counseling, 14*(1), 69-73.

McGoldrick, M. (1982). Ethnicity and the family life cycle. In B. Carter & M. McGoldrick (Eds.), *The changing family life cycle* (2nd ed., pp. 69-90). Boston, MA: Allyn and Bacon.

Oetting, E. R., & Beauvais, F. (in press). Orthogonal cultural identification theory: The cultural identification of minority adolescents. *The International Journal of the Addictions.*

Ponterotto, J. G. (1989). Expanding directions for racial identity research. *The Counseling Psychologist, 2*, 264-272.

Rosenthal, C. J., & Marshall, V. W. (1988). Generational transmission of family ritual. *American Behavioral Scientist, 31*(6), 669-684.

Shon, S., & Ja, D. (1982). Asian families. In M. McGoldrick et al (Eds.), *Ethnicity and family therapy* (pp. 208-228). New York: The Guilford Press.

Sue, D. W., & Sue, D. (1985). Asian-Americans and Pacific Islanders. In P. Pederson (Ed.), *Handbook of cross-cultural counseling and theory* (pp. 141-146). Westport, CT: Greenwood Press.

Sue, S., & Sue, D. W. (1971). Chinese-American personality and mental health. *Amerasia Journal, 1*, 35-49.

Sue, S., & Zane, N. (1987). The role of culture and cultural techniques in psychotherapy: A critique and reformulation. *American Psychologist, 42*, 37-45.

Suinn, R. M., Rickard-Figueroa, K., Lew, S., & Vigil, P. (1987). The Suinn-Lew Asian Self-Identity Scale: An initial report. *Educational and Psychological Measurement, 47*, 401-407.

Szapocznik, J., Santisteban, D., Kurtines, W., Perez-Vidal, A., & Hervis, O. (1984). Bicultural effectiveness training: A treatment intervention for enhancing intercultural adjustment among Cuban American families. *Hispanic Journal of Behavioral Sciences, 6*, 317-344.

Trimble, J. E. (1991). Ethnic specification validation prospects, and the future of drug research. *The International Journal of the Addictions, 25*, 149-170.

Troll, L., Bengston, V., & McFarland, D. (1979). Generations in the family. In W. R. Burr, R. Hill, F. I. Nye, & I. L. Reiss (Eds.), *Contemporary theories about the family: Research based theories* (pp. 127-161). New York, NY: The Free Press.

The Relationship of Racial and Feminist Identity Attitudes to Black Women's Career Values

Pamela L. Weathers
University of California, Santa Barbara

Chalmer E. Thompson
University of Southern California

Sheri L. Malvin and Jaime Rodriguez, Jr.
University of California, Santa Barbara

In this study, we identified values that were most prevalent in guiding the career decisions of a sample of Black college women and the extent to which these career values were predictive of racial and feminist identity attitudes among the sample. Using a paired comparison technique, findings show that the values Balancing Career and Family, Achieving Self-Fulfillment, and Changing Character of the Profession were chosen most frequently among other values related to career decision-making. Career values also significantly predicted racial identity attitudes and socioeconomic status, but not feminist identity attitudes. Implications related to career counseling with Black college women are discussed.

Over the past twenty years, the counseling literature has witnessed an increase in the number of theoretical and empirical articles on the career development of women (e.g., Astin, 1984; Betz, 1982; Betz & Fitzgerald, 1987; Jenkins, 1989; Ornstein, Cron, & Slocum, 1989; Ornstein & Isabella, 1990). Increased attention towards women and their vocational development evolved largely from the recognition that prominent theories on adult career development are based on the study of men, and consequently, may inadequately explain women's career development (Betz, 1982; Harmon, 1977). In addition, changes occurring in the U.S. economy and the steady rise of female workers make the study of women's career development critical to theory development and to the effective delivery of counseling services to a diverse workforce.

Amid a myriad of factors which contribute to explanations of women's career development, sociocultural factors—particularly the impact of gender-role socialization—represent a major theme in this area of research (Astin, 1984; Hackett, Betz & Doty, 1985). For example, Harmon (1977) describes how the traditional beliefs and life patterns of women influence their motivations regarding work Harmon (1977) further asserts that women typically satisfy their needs through associations with men (usually fathers and/or husbands) whose labor assures fulfillment of their needs. To work outside of the home and in nontraditional jobs is to risk whatever belongingness, love, and esteem they have been receiving by accepting traditional female roles (Betz, 1982, p. 54). As a result, women may not learn that they can independently gratify their own needs such as self-esteem and self-actualization. A study conducted by Betz (1982) partly supports this premise. Hackett and Betz (1981) explicate a model of women's career development based on Bandura's concept of self-efficacy expectations (the belief or conviction that one can successfully perform a given task or activity) to explain how mediating cognitive processes link socialization to occupational behavior. They propose that women, as a result of their socialization, "lack strong career-related behaviors and thus, fail to fully realize capabilities and talents in career pursuits" (p. 326).

Lacking from this literature are conceptual frameworks or empirical studies that address the influence of sociocultural as well as sociopolitical factors on the career development of visible racial/ethnic group (VREG)[1] and/or low-income/working class women. In an overwhelming majority of the research on women's career development, samples are comprised largely of White, middle-class women, or, in cases where race or class is unspecified, presumed White or (at least) middle-class. The continued practice of limiting theories and research studies to this population under the guise of explaining issues related to "women" raises serious barriers to theory-building and to assisting practitioners who work with VREG and/or lower-income women. Notably, this practice fails to address the impact of the interplay of such relevant factors as culture, race, gender, and class on human behaviors and development (Griscom, 1979). These factors are likely to have considerable implications in counseling diverse groups of female clients.

Black Women and Career Psychology

Several authors (Davis, 1981; Giddings, 1984; hooks [the "h" is purposely in lower-case], 1981; Malson, 1983; Moraga & Anzalda, 1981) assert that the exclusion of Black and other women of color in various professional literatures perpetuates their invisible status in society. This invisibility is illustrated in the common usage of the phrase "women and minorities" which implicitly refers to "White women and minority men" (hooks, 1981).

The counseling literature has not been immune to this exclusion. According to Smith (1983), "the dearth of research on minority females stands in direct contrast to the wealth of studies conducted on White females and their career development" (p. 207). Relevant to understanding the career motives and behaviors of Black women is an understanding of historical and present-day influences. Historically, African-American women have labored outside the home; as a consequence, many Black women today have been exposed to maternal work role models. Yet, in contrast to the vast majority of maternal work role models who worked exclusively out of economic necessity, new generations of Black women are seeking secondary rewards and, as such, may need counseling to help them expand their career options and redefine their career needs (Helms, 1979). One of the first challenges for the counselor is to understand the world view of the Black and/or working-class female client by becoming aware of the cultural, historical, and political factors that can influence their career decisions.

Stereotypically, Black women are perceived as dominant, independent, superwoman types who are capable of taking on multiple roles with ease and at the expense of a husband or family. Perhaps as a result of this stereotype and of the cursory attention to Black women in the counseling literature, they are also perceived as being unneedy of counseling services (Helms, 1979). When these stereotypes are harbored by counselors, the likelihood for misunderstandings is considerable. As for all stereotypes that go unexplored, the counselor may not only overlook the individuality of his or her client, but fail to understand the vulnerability of Black women to poor physical health, distressed economic conditions, and psychological and psychosocial problems (White, 1990). A lack of awareness by counselors about Black and/or working-class women may also hinder their ability to perceive and appreciate the strengths of these women.

For the purpose of shedding some light on Black women in relation to careers, this study investigates the values that are instrumental to career decision-making among a sample of Black college women. According to Thomas (1967), values represent a normative, conceptual standard of desired behavior that influence individuals in choosing among personally perceived alternatives. Moreover, and according to Parham and Parham (1989), values of specific ethnic groups are transmitted from generation to generation in ways that allow cultural traditions to continue and self-actualizing behaviors to flourish. Thus, the study of values may provide a foundation for exploring the career behaviors of specific populations.

A second purpose of this study is to examine the relationship between Black women's career values and two constructs related to their patterns of socialization: racial identity attitudes and feminist identity attitudes. We believe that this line of inquiry has important implications to career counselors as changes in how an individual views herself in a racist and sexist society can influence decisions preoccupationally and occupationally. Among college women, knowledge of one's image, racially or as a woman, can assist the counselor in understanding the client vis-a-vis how she will anticipate challenges in her career. Although confidence concerning one's identity as a Black person and as a woman does not assure a problem-free existence, coming to terms with racism (and one's relationship with Whites and Blacks) and sexism (one's relationships with other women and men) may help facilitate a greater openness to exploring careers and to making less restrictive career decisions and aspirations.

To study racial identity attitudes we used an adaptation of Parham and Helms' (1981) Racial Identity Attitude Scale. This measure is based on the first four stages of Cross's (1971; 1978) theory of Black racial identity development, also termed psychological Nigrescence. Briefly, Cross's model proposes that Blacks move through a series of stages in their attainment of a sound, racial consciousness. In the first stage, termed the Preencounter stage, the individual devalues Black people as well as that which is identified with Black people while idealizing White people and White (westernized) culture. The Encounter stage person heralds a shift in world view as a result of one or more jarring experiences with racism (Helms, 1990) or as a result of one of more tremendously positive experiences with other Black people. During this stage, the individual is initially confused about his or her identity and ashamed and guilty about his/her previous world view, but eventually feels positive about his/her Black identity. The transition to the Immersion-Emersion stage of racial identity development is characterized by the individual idealizing Blackness, immersing him/herself in Black culture, and denigrating White people and White culture. At the fourth, Internalization stage of development, the individual achieves a sense of inner peace with his/her Blackness and is motivated to become involved politically in the eradication of oppression of Blacks and other oppressed groups (Parham & Helms, 1985).

Derived from Cross' racial identity development theory, Downing and Rousch (1985) proposed a similarly structured model to explain the process that women experience as they strive to achieve an authentic and positive feminist identity. The five stages of this model are Passive Acceptance, Revelation, Embeddedness/Emanation, Synthesis, and Active Commitment. (We omit a description of the final stage in order to achieve a parallel comparison of this model with the racial identity development model).

Passive Acceptance reflects an acceptance of traditional sex roles and discrimination against women accompanied by a view of men as superior. The Revelation stage occurs when a critical incident (or incidents) causes the individual to question her self, gender-role behaviors, and attitudes and men are generally perceived negatively. Embeddedness-Emanation involves a feeling of inter-connectedness with other women and more realistic thinking toward and interactions with men occur. During the Synthesis stage, the development of an authentic, positive feminist identity is formed. At this point, men are evaluated on an individual, rather than collective basis.

For exploratory purposes, we also investigate the extent to which career values are predictive of participants' socioeconomic status levels.

Method

Participants

Participants for this study consisted of 72 Black American undergraduate women students at a predominantly White university located on the west coast. The participants' ages ranged from 18 to 22 years, with a mean age of 20. Twenty-seven percent of the participants were freshmen level, 11% were sophomores; 30% were juniors and 30% were seniors. The majority (51%) reported having majors in the social sciences. The remaining majors included Communication Studies (11%), Art, Language, and Literature (9%), Engineering or Mathematics (8%), and natural or physical sciences (5%), double majors (with both majors in social sciences) (3%) and allied health (3%). Nine percent of the participants reported being undecided about their majors.

Thirty-nine percent reported being from middle-class socioeconomic backgrounds, followed by 32% reporting lower middle-class statuses, 18% reporting upper-class backgrounds, and 11% reporting lower socioeconomic levels.

Instruments

Participants were administered a questionnaire which was comprised of the following measures: (1) a demographic data sheet; (2) the Career Values Survey; (c) a modified version of the Racial Identity Attitude Scale (RIAS) (Parham & Helms, 1978), and (d) the Feminist Attitude Scale (FIAS; Downing & Roush, 1985).

Demographic Data Sheet. Respondents were asked to indicate their age, academic level, major, and socioeconomic status (lower, lower-middle, middle, upper-middle, and upper). Three additional items (primary and secondary career aspirations, religious preference, and racial self-designation) were included for exploratory purposes. The added items were not included in data analyses in the present study.

The Career Values Survey. Using a forced-choice, paired comparison format, we formulated a survey comprised of statements that describe values individuals are likely to hold that contribute to their career decision-making. Selection of the items used for this investigation of career values was similar to the selection procedure implemented by Atkinson and his colleagues (Atkinson, Furlong, & Poston, 1986; Atkinson, Poston, Furlong, & Mercado, 1989) in identifying characteristics preferred by Black students in choosing a counselor. In their study, characteristics were selected based on a review of counselor-client similarity studies. Because of the dearth of research on Black women, the value items included in this study were gleaned from divergent sources, including studies and articles in career psychology as relating to general career development (Osipow, 1983), to Black career development (e.g., Smith, 1975, 1983), to women's career development (e.g., Brooks, Jenkins, 1989; Ornstein, Cron, & Slocum, 1989; Ornstein & Isabella, 1990; Osipow, 1975), and, in many instances, in the sociological literature as relating specifically to Black women and issues of self-image (Davis 1981; Giddings, 1984; hooks, 1981).

This inquiry led to the development of nine career values: (1) the achievement of financial wealth; (2) the achievement of prestige for my family; (3) the achievement of prestige/status for myself; (4) the achievement of self-fulfillment; (5) balance between career and family; (6) balance between career and leisure/recreational activities; (7) balance between career and religious/civic activities; (8) the opportunity to change the character of the profession vis-a-vis a Black and/or female perspective; and (9) the opportunity to work with others similar to myself. (A complete and detailed description of how these values were developed is available from the second author.)

Each of the nine career value statement was matched with the remaining eight generating a total of 36 items (9 X 8/2). An illustration of one of the paired value statements and instructions is provided below:

> Of the following two statements on career values, would your choice in careers be based on:
>
> [ ] the opportunity to achieve financial wealth?
>
> OR
>
> [ ] the opportunity to achieve a sense of self-fulfillment on the job?

To determine whether the nine career values could predict racial identity attitudes and feminist identity attitudes, each statement of the Career Values Survey (two statements per item, totaling 72 individual statements) was given a value of either 1 or 0; the statement that was checked by the respondent was assigned a value of 1; the unchecked statement was assigned a value of 0. For each occasion that a career value statement appeared in the measure (eight times per statement), the total sum was calculated, making the highest possible total 8 and the lowest 0.

Modified Racial Identity Attitude Scale (Helms & Parham, in press; Parham & Helms, 1978). The RIAS was designed to assess the attitudes prevalent in the first four racial identity development stages based on Cross' (1971, 1978) model of psychological nigrescence. This scale, and the recently updated scale (Helms & Parham, in press) consists of 30 items to which participants responded using a 5-point Likert scale (1=Strongly disagree to 5=Strongly Agree). For the purpose of brevity, we constructed a modified version of the RIAS by gleaning from the original theoretical formation by Cross and from the items of the RIAS, we developed a short scale comprised of one-paragraph descriptions of the attitudes inherent in each of the racial identity development stages. Participants were instructed to rate the extent to which they agreed with the general sentiment expressed in each paragraph using a 5-point Likert scale. To illustrate the paragraph describing Immersion-Emersion attitudes is provided below:

> I believe strongly that Blacks are treated unfairly by Whites and that racism is embroidered in the fabric of American society. At times, I feel angry and bitter about my status as a "minority," yet I feel hopeful that through unity among Black people, hard work, and time, we can overcome racism. I believe that my African heritage is quite unique; there is nothing like it in all the world. An ideal world, to me, would be characterized by genuine unity among Black people. I believe that a Black movement is imminent and I plan to take part actively in these efforts. My interpersonal alliances are largely with my Black sisters and brothers and I generally avoid relationships with White people. I have an appreciation for Black art and literature, writings by Black authors, and seminars or lectures by Black people, particularly as these forums reflect Black nationalistic views.

Feminist Identity Attitude Scale (Downing & Rousch, 1985). We developed the Feminist Identity Attitude Scale (FIAS) to assess the attitudes prevalent in the first four feminist identity development stages proposed by Downing and Rousch (1985). This short scale, like the modified RIAS, was comprised of paragraph descriptions of the attitudes inherent in each of the feminist identity stages. Participants again were instructed to rate the extent to which they agreed with the general sentiment expressed in each paragraph using a 5-point Likert scale (1=Strongly Disagree; 5=Strongly Agree). To illustrate the paragraph describing Revelation is provided below:

> Lately, I have been affected by the realization that men and women are treated differently by society. I am becoming more and more convinced that women are treated unfairly in the work force and that men often enjoy most advantages at the expense of women and sometimes other men. Further, I feel that many women are not aware of this; however, we sometimes allow or help men to achieve the upper hand. Increasingly, I am beginning to trust my own instincts and I feel that my beliefs will help me to achieve my goals more than the advice I receive from men.

Procedure

Survey instruments were mailed to the total population of Black female undergraduates fully matriculated at a major, predominantly White university located on the U.S. west coast (N=272). Surveys were mailed approximately 10 weeks after the beginning of the academic year. Of the 272 instruments sent, 43 were returned by the post office unopened due to address changes; consequently, of the 229 instruments that were presumably received by participants, 72 were completed and returned yielding a 31% response rate.

Each instrument was accompanied by a cover letter explaining the purpose of the study and a business reply envelope. Participants were instructed to mail back their completed instruments by a specified due date. To increase the rate of return, this due date was extended by three weeks and potential participants were informed of this extension via letters. Respondent names were entered in a drawing for free dinners at a local, Black-owned restaurant.

Results

To analyze the paired comparison data, we developed a proportions matrix for the sample which reflected the average percentage of respondents who preferred each career value over all the other career values. Table 1 contains the average percentages and rankings of preferences for career values among the sample. As illustrated, the value Balance between Career and Family was selected most frequently by respondents (76%), followed narrowly by the value Achieving Self-fulfillment (75%). These were followed by values for Changing Character of the Profession (60%), Family Prestige (52%), Acquiring Financial Wealth (47%), Balance between Career and Religious/Civic Activities (45%), Personal Prestige/Status (41%), Working with Similar Persons (40%), and Balance between Career and Leisure/Recreational Activities (28%).

Career Values and Racial Identity Attitudes. Prior to entering these sums into a regression equation to predict each of the racial identity attitudes, a Pearson's correlation was conducted and tested for probabilities using the Bartlett's chi square statistic. This test yielded a significant chi square value (χ^2=119.31, $\underline{p} < .001$), indicating that the intercorrelations between variables were globally significant. To reduce the level of significance, we eliminated a total of four variables, resulting in a nonsignificant chi square value (χ^2=17.240, $\underline{p}$ = .070). Table 2 is a correlation matrix with the five variables that were used in these analyses.

Four separate multiple regression analyses were performed using each subscale score from the modified RIAS as the dependent variable and the sum scores of the five career value variables as the independent variables. Entered simultaneously in the regression equation, these values predicted significantly for Preen-counter attitudes ($\underline{R}$=.43, $\underline{R}^2$=.18, $\underline{F}$(5,62)=2.182, $\underline{p} <$ .001). Variables yielding significant $\underline{t}$ values for the prediction of Pre-encounter attitudes included Achieving Self-Fulfillment ($\underline{B}$=0.19, $\underline{t}$=3.49, $\underline{p} <$ .001) and Changing the Character of the Profession ($\underline{B}$=0.19, $\underline{t}$=-2.012, $\underline{p}$ =.05). Variables yielding significant $\underline{t}$ values for the prediction of Immersion/Emersion attitudes included the value Achieving Personal Prestige/Status ($\underline{B}$=-.10, $\underline{t}$=-2.331, $\underline{p} <$ .05), Achieving Self-Fulfillment ($\underline{B}$=-0.12, $\underline{t}$=-2.156, $\underline{p} <$ .05), and Changing the Character of the Profession ($\underline{B}$=0.159, $\underline{t}$=3.21, $\underline{p}$ = 0.972).

Table 1. Paired-Comparison Data of the Nine Career Values

	Career Values								
Career Values	**Family Resps.**	**Fulfill-ment**	**Character**	**Family Prestige**	**Wealth**	**Religion**	**Self Prestige**	**Similar**	**Leisure**
Family Resps.		50.0	73.6	75.0	75.0	88.9	75.0	83.3	75.0
Fulfill-ment			65.3	68.1	87.5	69.4	88.9	72.3	95.8
Character				58.4	61.2	66.7	58.4	75.0	88.9
Family Prestige					62.5	58.4	59.7	66.7	68.1
Wealth						66.7	47.3	65.3	75.0
Religion							62.5	56.9	61.2
Self Prestige								52.8	68.1
Similar									68.0
Leisure									

NOTE: Each cell reflects the percentage of subjects' responses indicating preferences for the career value in that row versus the career value in the column.

Table 2. Intercorrelations of Career Value Items

	Career Values				
Career Values	**Family Respons.**	**Fulfillment**	**Self Prestige**	**Character Profession**	**Wealth**
Family Resps.	1.000	0.005	-0.138	.004	-0.283*
Fulfillment		1.000	0.053	0.215	0.250
Self Prestige			1.000	-0.115	0.250*
Character Prof.				1.000	-0.091
Wealth					1.000

*p < .05

Table 3. Means,Standard Deviations of Variable Sum Scores and Summary of Multiple Regression Analysis for Racial Identity Attitude Stage.

	Racial Identity Attitude Scales									
			Preencounter		Encounter		Immersion		Internalization	
Career Values	**M**	**SD**	**B**	**1**	**B**	**1**	**B**	**1**	**B**	**1**
Family Resps.	5.29	1.91	..009	-.127	.080	.98	-.117	-1.68	-.002	.030
Fulfillment	6.68	2.38	.191	3.49c	-.030	-.50	-.119	-2.256a	.002	.032
Self Prestige	3.56	3.14	-.008	-.192	-.012	-.238	-.098	-2.33a	-.033	-.778
Character Profession	4.98	2.64	-.099	-2.01a	.020	.341	.159	3.21b	-.001	-.019
Wealth	3.61	2.22	.018	.298	.062	.832	.116	1.864	-.017	-.275

a p<.005
b p<.01
c p<.001

Analyses performed using Encounter attitudes and Internalization attitudes were not significant (R=.17, R^2=.03, F(5,62)= -0.364, p = .87; R=.12, R^2=.01, F(5,62)=0.173, p = 0.972). Table 3 shows the means and standard deviations for the sum scores of the Career Values Inventory and a summary of the multiple regression analyses using the racial identity attitudes as dependent variables.

Career Values and Feminist Identity Attitudes. Multiple regression analyses using the five career variables as predictor variables and feminist identity attitude items as dependent variables revealed non-significant findings. Table 4 shows a summary of the multiple regression analyses using the feminist identity attitudes as dependent variables.

Exploratory analyses were performed to determine whether the sum scores across the career value items predicted self-reported socioeconomic status levels. Findings reveal that career values significantly predicted socioeconomic status (R=.41, R^2=.17, F(5,63)=2.58, p < .05. As Financial Wealth scores increased, socioeconomic status levels decreased (B=-0.117, t=-2.242, p < .05).

Discussion

The purpose of this study was to investigate (1) the values most prevalent in guiding the career decisions of a sample of Black college women and (2) the extent to which these career values predicted racial and feminist identity attitudes. Findings show that among a set of nine conceptually developed career values, participants selected the value of having job flexibility that would allow them to pursue family responsibilities as most important in making career decisions, followed very closely by the value achieving self-fulfillment. The value of changing the character of one's chosen profession from the perspective of a Black woman represented the third most important value among this sample.

Perhaps as a result of a conspiring of both societal expectations and personal/maternal desire raising a family reflects an important component in the lives of

Table 4. Means, Standard Deviations, and Summary of Multiple Regression Analysis for Feminist Identity Attitude Stages

Feminist Identity Attitude Scales										
Career Values			Passive-Accept		Revelation		Embeddedness		Synthesis	
	M	*SD*	*B*	*t*	*B*	*t*	*B*	*t*	*B*	*t*
Family Resps.	5.29	1.91	-.084	-2.492[*]	.125	2.367[*]	-.002	-.026	-.065	-.917
Fulfillment	6.68	2.38	-.003	-.118	.035	.832	-.011	-.235	-.058	-1.033
Self Prestige	3.56	3.14	.017	.820	.001	.043	-.028	-.748	.023	.532
Character Possession	4.98	2.64	.032	1.336	-.038	-1.013	.044	1.026	.082	1.622
Weath	3.61	2.22	.008	.030	.007	.140	-.086	-1.579	-.055	.869

[*] $p < .05$

women. Although balancing parenthood with work presents a number of stressors for all women and men, the motivation of Black college women to strike this balance may relate to historical and political factors. For example, Black female slaves had little control as to whether or not they wanted to bear children and were often times forced to have children, only to see them traded off to other plantations. These women were also responsible for nurturing and tending to the children of their slave masters and mistresses often in neglect of their own children. This carried over even after the emancipation of slaves to the Black domestic. As a result of these historical occurrences, successive generations of Black women may have adopted a heightened appreciation for their right to bear and raise their own children. What is more, successful Black people may be determined to rear children in order to influence and inspire future generations toward building a better (e.g., more racially equal) society.

For economic survival, past generations of Black women combined their familial responsibilities with work outside of the home. Today's Black women, like all women, are faced with the same economic pressures, yet are exposed to greater opportunities in career choice, and relatedly, career prestige, mobility, and financial gain. Opportunities to achieve self-fulfillment take on new meaning. Because they do not have to settle for low-paying, low-status and "traditional" (i.e., female-dominated) jobs, Black college women are able to seek careers that will offer them the opportunities that were once afforded almost exclusively to White people.

This sample also tended to base their career decisions on the value of changing the character of their chosen profession from the perspective of a Black and/or woman. This finding suggests that, overall, Black college women place importance on how their contributions can alter and re-shape the way many professions are currently perceived. This value may take the form of instituting changes at the job that directly impact other women and VREG men (e.g., a lawyer who takes on the cases of Black people or developing social programs that take into account Africentric factors related to social adjustment). One of the challenges that women and VREG men are now facing (and will continue to face increasingly) is how to incorporate their interests in helping oppressed groups while pursuing professions that do not involve direct services, especially professions in the physical and natural sciences, mathematics, and engineering which so desperately need the representation of these populations. There may be a greater need to expand perspectives of one's livelihood to what occurs outside of the job as well as on the job, like mentoring economically disadvantaged children and adolescents, taking part in activities geared at helping the less fortunate, and so forth.

Our findings also indicate that career values significantly predicted two racial identity attitudes: Preencounter and Internalization. As the value for achieving self-fulfillment increased, so did levels of Preencounter attitudes. This finding is consistent with Black racial identity theory which asserts that the Preencounter individual tends to prescribe to such Eurocentric or westernized values like individualism (i.e., self-interests) over communalism which is an Africentric cultural value and orientation. Communalism reflects a sense of "we-ness" that Blacks have adopted culturally—through African retentions—and as a survivalistic posture against racism in America (see Thompson & Fretz, in press). The inverse relationship between the value of changing the character of the profession and Preencounter attitudes is also consistent with Black racial identity development theory. This relationship may reflect a denial by some of the probability that Black people have and will continue to have an impact on different professions, the majority of which are dominated by White people and White culture.

As the value for changing the character of the profession increased, Immersion/Emersion attitudes increased while values for decreased levels of Immersion/Emersion attitudes. This finding is again consistent with Black racial identity development theory in illustrating that the recognition that one can and will contribute to society from the perspective of a Black person is uppermost in the minds of individuals with dominant Immersion/Emersion stage attitudes. Values for gaining personal prestige and achieving both reflect personal or individual oriented values which are conceptually in contrast to characteristics of Immersion/Emersion stage attitudes. The interest of the Immersion/Emersion individual is to promote a sense of group identity among Black people. Even though careers are seen as a typically individual endeavor, a person with dominant Immersion/Emersion attitudes may perceive these personal values as taking on little significance.

There was no significant relationship between career values and feminist identity attitudes. Key components of the feminist identity development model have to do with women rejecting traditional sex roles, acknowledging that sexism exists, and developing an authentic feminist identity (Downing & Rousch, 1985). In effect, this model presupposes that feminist identity is an isolated issue that can be separated from other sociocultural issues of women. It is conceivable that, for this sample of Black college women, issues of developing a feminist identity is inextricably tied with the development of Black womanhood, an entity into itself. Thus, the development of attitudes, feelings and beliefs about feminism by Black women may not necessarily follow the same pattern or quality as that of White women (Gidding, 1984; Helms, 1984, personal communication; hooks, 1981). Perhaps the identity of Black women is that of a Black woman, first and foremost.

While our figure of 31% of students responding to the survey is comparable to rates typically obtained in mail surveys (e.g., 10% to 50%; Sellitz, Wrightman, & Cook, 1976), caution should be exercised in interpreting and generalizing these findings to other Black college women in similar academic settings. That this sample consists of college-attending women may also limit generalizing findings to Black women not attending college and at more varied age groups. In addition, future researchers who plan to involve college student samples need to obtain a more broad representation of student majors than was shown in the present study.

These limitations notwithstanding, the findings from this study present tentative implications for counselors and therapists whose Black female clients express problems related to making career decisions. First, querying the client about the values that guide her decisions can assist the counselor in ensuring that a range of career possibilities are considered. While Black college women can conceivably avail themselves to a variety of career opportunities, there appears to be a funnelling into relatively few career areas (Helms, 1979). Counselors can help usurp this restrictiveness in career choices by working with the values that guide the client's decisions, by acquainting their client with the vast numbers of career options that can suit her career values and by working through any obstacles that may prevent the client from pursuing these options.

If indeed Black college women who enter counseling strongly value balancing between work and family, counselors need to be aware of the limitations inherent in this arrangement for women in general and to Black women in particular. The adoption of multiple roles for women are not without consequences: according to studies, women tend to experience greater inter-role conflict and overload than men in assuming multiple roles (Cleary & Mechanic, 1983; Rodin & Ickovics, 1991). In heterosexual relationships, even when spouses work wives perform a disproportionate share of childcare and household tasks than husbands (Scarr, Phillips, & McCartney, 1989). It is also conceivable that the stereotype of the strong, domineering, and independent Black woman may lead the counselor to believe that his/her client is invincible. While confidence, pride, and assertiveness may genuinely characterize some Black female clients, it would be a danger for counselors to also assume that this demeanor precludes the need for serious intervention.

From a developmental perspective findings from this study suggest that an individual's racial identity is closely tied with her career identity. Therefore, counselors need to be aware of the role racial identity development plays on Black women's career decisions. Conflicts that may arise in the career decision-making process may relate to issues of racial identity, reflecting a transitioning or recycling between the different stages (Parham, 1989). As the progression toward racial consciousness has been equated with the positive mental health, counselors should foster this development by encouraging the client's self-exploration and even facilitating discussion regarding her attitudes and beliefs concerning racism, Black people, and Whites. According to Helms (1990), the facilitation of racial identity development during counseling occurs optimally under conditions where the counselor is at least one stage higher in racial identity development. For White counselors and counselors-in-training, there are numerous training models that address the knowledges, attitudes, and skills needed to prepare themselves to work with Black clients in counseling (i.e., Corvin & Wiggins, 1989; Helms, 1990; Sabnani, Ponterotto, & Borodovsky, 1991).

Finally, it is advised that counselors explore and address issues of powerlessness experienced by men and women of all races, ethnicities, and classes. As gleaned from the findings from our exploratory analysis, Black college women from lower socioeconomic backgrounds are likely to express values toward attaining wealth. A counselor who is sensitive to the combined effects of racism and classism is likely to recognize that his or her lower-income Black female client's desire for achieving wealth may reflect a desire to become more empowered in what she perceives as a society which upholds the values and beliefs of people from middle- and upper-middle class backgrounds. For the vantage point of these women, wealth may be perceived as the ultimate means of attaining power, status, and prestige. By exploring alternative means of attaining power which will allow these women or other similarly disposed clients to recognize their inner strengths and abilities, counselors can assist their clients in developing a sense of personal empowerment (Myers, 1988).

Note

[1]Visible racial/ethnic group (VREG) is used to describe persons from African-American, Asian-American, Hispanic/Latino American and Native American backgrounds and was originally used by Cook and Helms (1988) to replace the term "minority."

Notes

Correspondence concerning this article should be addressed to Chalmer E. Thompson, Division of Counseling and Educational Psychology, University of Southern California, WPH-500A, Los Angeles, CA 90089-0031.

This study was funded by the Graduate Research Mentorship Program and the Humanities/Social Sciences Research Grant, sponsored by the Graduate Division, University of California, Santa Barbara 93106. The authors thank Drs. Donald R. Atkinson, Michael Furlong, and Nolan Zane for their assistance in earlier drafts of this manuscript. We also thank Ms. Cindie Bowles for her contributions in the development of measures used in the study.

The third and fourth authors contributed equally to the study.

References

Astin, H. S. (1984). The meaning of work in women's lives: A sociopsychological model of career choice and work behavior. *The Counseling Psychologist, 13*, 117-126.

Atkinson, D. R., Furlong, M. J., & Poston, W. C. (1986). Afro-American preferences for counselor characteristics. *Journal of Counseling Psychology, 33*, 326-330.

Atkinson, D. R., Poston, W C., Furlong, M. J., & Mercado, P. (1989). Ethnic preferences for counselor characteristics. *Journal of Counseling Psychology, 36*, 68-72.

Betz, E. L. (1982). Need fulfillment in the career development of women. *Journal of Vocational Behavior, 20*, 53-66.

Betz, N. E. & Fitzgerald, L. F. (1987). *The career psychology of women.* New York: Academic Press.

Brooks, L. (1984). Counseling special groups: Women and ethnic minorities. In D. Brown, L. Brooks, and Associates (Eds.), *Career choice and development* (pp. 337-354). San Francisco: Jossey-Bass.

Cleary, P., & Mechanic, D. (1983). Sex differences in the psychological distress among married people. *Journal of Health and Social Behavior, 24*, 111-121.

Cook, D. A., & Helms, J. E. (1988). Visible racial/ethnic group supervisees' satisfaction with cross-cultural supervision as predicted by relationship characteristics. *Journal of Counseling Psychology, 33*, 268-274.

Corvin, S. A., & Wiggins, F. (1989). An antiracism training model for White professionals. *Journal of Multicultural Counseling and Development, 17*, 105-114.

Cross, W. E. (1971). The Negro-to-Black conversion experience: Toward a psychology of Black liberation. *Black World, 20* (9), 13-27.

Davis, A. Y. (1981). *Women, race, and class.* New York: Vintage.

Downing, N. E. & Roush, K. L. (1985). From passive acceptance to active commitment: A model of feminist identity development for women. *The Counseling Psychologist, 13*. (4) 695-709.

Giddings, P. (1984). *When and where I enter: The impact of Black women on race and sex in America.* New York: William Morrow & Co.

Griscom, J. L. (1979). Sex, race, and class: Three dimensions of women's experience. *The Counseling Psychologist, 8,* 10-11.

Gutek, B. A., & Larwood, L. (1987). Women's careers are important and different. In B. A. Gutek and L. Larwood (Eds.) *Women's career development* (pp. 7-14). Newbury Park, CA: Sage Publications.

Fitzgerald, L. F., & Betz, N. E. (1983). Issues in vocational psychology of women. In W. B. Walsh & S. H. Osipow (Eds.). *Handbook of vocational psychology* (pp. 83-159). Hillsdale, NJ: Erlbaum.

Hackett, G., & Betz, N. E. (1981). A self-efficacy approach to the career development of women. *Journal of Vocational Behavior, 18,* 326-408.

Harmon, L. W. (1977). Career counseling for women. In E. Rawlings & D. K. Carter (Eds.) *Psychotherapy for women* (pp. 197-206). Springfield, IL: Charles C. Thomas.

Helms, J. E. (1979). Black women. *The Counseling Psychology, 8,* 40-41.

Helms, J. E. (April 1990). Personal communication.

Helms, J. E. & Parham, T. A. (1985). Attitudes of racial identity and self-esteem of Black students: An exploratory investigation. *Journal of College Student Personnel,* 143-146.

hooks, b. (1981). *Ain't I a woman?* Boston: South End Press. Jenkins, S. R. (1989). Longitudinal prediction of women's careers: Psychological, behavioral, and socio-structural influences. *Journal of Vocational Behavior, 34,* 204-235.

Malson, M. R. (1983). Black women's sex roles: The social context for a new ideology. *Journal of Social Issues, 32* (3), 101- 113.

Moraga, C., & Anzaldua, G. (1981). *This bridge called my back: Writings by radical women of color.* New York: Kitchen Table.

Maslow, A. A. (1954). *Motivation and personality.* New York: Harper.

Ornstein, S., & Isabella, L. (1990). Age versus stage models of career attitudes of women: A partial replication and extension. *Journal of Vocational Behavior, 36,* 1-19.

Osipow, S. H. (1975). *Emerging women: Career analysis and outlooks.* Columbus, OH: Merrill.

Osipow, S. H. (1983). *Theories of career development.* Englewood Cliffs, NJ: Prentice-Hall.

Parham, T. A. (1989). Cycles of psychological nigrescence: *The Counseling Psychologist, 17* (2), 187-226.

Parham, W. D., & Parham, T. A. (1982). The community and academic achievement. In G. L. Berry and J. K. Asamen (Eds.) *Black students: Psychological issues and academic achievement* (pp. 120-137). Newberry Park, CA: Sage Publications.

Rodin, J., & Ickovics, J. R. (1990). Women's health: Review and research agenda as we approach the 21st century. *American Psychologist, 45,* 1018-1034.

Sabnini, H. B., Ponterotto, J. G., & Borodovsky, L. G. (1991). White racial identity development and cross-cultural counseling training: A stage model. *The Counseling Psychologist, 19,* 76-102.

Scarr, S., Phillips, D., & McCartney, K. (1989). Working mothers and their families. *American Psychologist, 44,* 1402-1409.

Sellitz, C. & Wrightsman, L. S., & Cook, S. W. (1976). *Research methods in social relations.* New York: Holt, Rinehart, and Winston.

Smith, E. J. (1983). Issues in racial minorities' career behavior. In W. B. Walsh and S. H. Osipow (Eds.) *Handbook of Vocational Psychology* (pp. 161-222). Hillsdale, NJ: Lawrence Erlbaum.

Smith, E. J. (1975). Profile of the Black individual in vocational literature. *Journal of Vocational Behavior, 6,* 41-59.

Thomas, W. (1967). *The Thomas self-concept values test: For children ages 3-9.* Grand Rapids, MI: Educational Services.

Thompson, C. E., & Fretz, B. R. (in press). Predicting the adjustment of Black students at a predominantly White university. *Journal of Higher Education.*

White, E. C. (1990). *The Black women's health book: Speaking for ourselves.* Seattle, WA: Seal Press.

Promoting a Healthier Cultural Climate on Campus: A Racial Identity Training Approach

Julia Yang, Lois Waters, Daine Jefferson, Janet Johnston
Shippensburg University
Shippensburg, Pennsylvania

Introduction

The purpose of the presentation was threefold. First, a campus-wide assessment and training model was presented. Second, results of a survey of faculty, staff, staff supervisors and student leaders were shared. Third, suggested training goals and activities were identified for future use by participants.

The presentation focused on racial identity training model based on Helm's (1984, 1990) White Racial Identity Development theory. Included in this training model were the exploration and development of what consisted "white identity" among faculty, staff, staff supervisors and students leaders. We contend that, in the short term, efforts of this sort can result in the growth of individuals' psychological, interpersonal, and cultural development. In the long term, there are implications for minority faculty/student retention and recruitment on campus. In addition, this presentation included a model of how the racial identity development approach can be utilized in training prospective counselors in theory, research, and practice.

Included in this paper are: 1) a report of a campus wide survey on racial identity attitudes of white faculty, administrators, staff, and student leaders; and 2) suggested stage appropriate training goals and activities. These materials will be published in a multi-cultural training resource manual at Shippensburg University.

Rationale

The cultural pluralism present in American society poses critical questions for higher education: What is the capacity of institutions to function in a pluralistic environment? What is the educator's responsibility to cultural diversity in the classroom? Upon recognition of changing demographics, are educators of higher education still living in a monolingual, monocultural, and very middle-to-upper-class world?

Today's educators must acquire knowledge and skills of what to convey and how to impart wisdom to students who represent more than one culture or social condition. White educators, however, before they become conversant about students' cultures, must involve themselves in a self-exploration as a member of the majority race to include an examination of their own connection with the racist system that oppresses the minority students they are trying to help.

As Shippensburg University moves towards greater diversity within its community, we contend that once white faculty, staff, staff supervisors, and student leaders are assisted in the exploration and development of what constitutes a "white identity", they will be enabled to better interact both socially and academically with students from diverse cultural backgrounds. Thus, the university can provide a positive climate in which members can be provided with the information and guidance necessary to encourage self-awareness and understanding of racial dynamics.

Highlights of White Racial Identity Development Theory

Interventions to address racial issues on campus generally take the form of antiracism training (Carter, 1990), and often attempt to involve blacks and whites in structured activities (Helms, 1990). Few theorists or researchers, however, contend that an understanding of how racist attitudes might be related to one's racial identity may help educators develop intervention strategies aimed at people's psychological and emotional understanding of racial issues (Carter, 1990; Helms, 1990).

Helms proposes (1984) five stages of racial consciousness which white individuals may go through that correspond to their attitudes about blacks. These stages include: Contact, Disintegration, Reintegration, Pseudo-Independence, and Autonomy. While earlier stages are indicative of racism (Carter, 1990), later stages will lead to better personal adjustment and more positive relationships with people of other races. The following are some examples of characteristics which may be found in individuals in each of the five stages:

Contact Stage

- Unaware of themselves as racial beings.
- Naive in their interactions with minorities.
- Typical statement: "When I talk to you I don't think of you as black."

Disintegration Stage

- Forced to acknowledge that they are white and that prejudice and discrimination exist.
- Tends to see self as less prejudiced than most members of majority group.
- Typical statement: "My parents are prejudiced, but I'm not."

Reintegration Stage

- May become hostile (overtly or covertly) towards blacks and more positively biased toward their own racial groups.
- Tends to minimize cross-racial similarities, while perceiving as negative those characteristics on which they view blacks as differing.
- Typical statement: "blacks are just as prejudiced as whites."

Pseudo-Independent Stage

- Intellectual acceptance and curiosity about blacks and whites.
- Emerging internalization of whiteness.
- Typical statement: "I accept all minority group members and believe that all should."

Autonomy Stage

- Not only knowledgeable about racial differences and similarities, but accepts these on both a cognitive and affective level.
- Actively seeks out interracial interactions because they are secure in their own racial identity and accepts, appreciates, and respects cultural differences.
  - Typical statement: "We are all members of the same global community."

According to Helms (1984, 1990), individuals at different stages of racial consciousness enter interpersonal/intergroup relationships with different attitudinal, behavioral, and affective predispositions. Racial climate of a particular environment is determined by the accumulation of the intrapersonal and interpersonal characteristics of its members. Thus, it is conceivable to survey and assess how individuals in a particular environment (such as a college campus) perceive both themselves and other individuals of other races in order to take effective steps towards combating racism.

Educators and True Diversity in Higher Education

American society serves as a microcosm of the world's races, languages and social conditions. Based upon the principles that culture is learned behavior and that learning is one of conditioning, education, then, becomes intrinsically interwoven into the framework of culture. According to Barker (1986), education, as found to be governed by enculturation, transmits cultural goals and patterns. Accepting these premises, educative process can be amplified when educators seek to understand values cross-culturally and assess every culture by its own goals. On the other hand, however, "a lack of awareness about the cultures of their students causes educators to rely solely upon their professional training—training which has mostly consisted of jargon, stereotypical assessments, and American values" (Barker, 1986, p. 7).

The fast changing demographics of American college populations and the increasing campus racial violence across the nation appear paradoxical and challenging for educators in higher education. Many colleges and universities across this country are quick to verbally endorse multi-cultural diversity, however, they encounter difficulties in operationalizing the necessary changes. Parham & Parham (1990) state that "Our observation of the academy leads us to conclude, unfortunately, that those in higher education, who should be most qualified to assist society in examining biases, prejudices, stereotypes, and defensive behavior are resistant themselves to change. We also acknowledge that a lack of movement toward diversification on the part of some may have to do with their being caught in a state of inertia or a quandary as to what to do or how to make a difference" (p. 6).

For years, white people in America not only have believed in the superiority of white cultures, but also have had the power to enforce discrimination at cultural, institutional, and individual levels. The Eurocentric view of individualism and self-reliance leave Americans (both white and the minorities) with the impression that equal opportunity can be equated to equal attainment. Underneath the disguise of the legislature (e.g. affirmative action) remain the continuous struggles of certain segments of the society with stereotyping, prejudice, and discrimination, all of which contribute to the subtle phenomenon of racism.

Racism is prejudice activated by a power system. It is developed in response to scarce resources and out of a concern for distribution of these resources (e.g. positions of authority, wealth, education, etc.). Institutionalized racism is far more insidious and dangerous because it is difficult to recognize, identify, isolate, and rectify since no one individual is responsible and there are few overt acts of discrimination. Higher education as a scarce resource is, therefore, subject to a high degree of institutional racism.

Professionals in higher education must recognize their connection with the racist system and their comfort with a passivity posture when confronted with new demands. Smith (1989) listed specific fundamental issues involved in the capacity of institutions to organize for diversity. They are: diversity of faculty and staff; conflict between students values and the institutional norms and missions; conflict as part of the institutional learning process; the quality of interaction of students with the institution and peers and between students and faculty; content of the curriculum, styles of teaching, and modes of assessment; and the perceived conflict between quality and diversity.

Institutional mechanisms for implementing change have to go beyond mere reactions to student unrest. Instead of waiting for social phenomena to dictate the next move, faculty, administrators, staff, and student leaders can provide decisive and proactive leadership in cultural diversification and make the academy the forum in which issues of ethnicity, culture, gender, disability, etc., are topics of critical discourse and analysis.

It is likely that a college reflects not only societal values and beliefs but also its unique way of executing these values and beliefs. Each college, however, has its own propaganda and culture because of the unique composition of its members, administrative leadership, and tradition. To create an environment where intercultural training can occur, a comprehensive understanding of cultural climate as experienced by both the organization and individuals in the organization is essential.

Method

Participants

Participants were 356 white faculty, administrators, staff, and student leaders of a small eastern undergraduate state university. An additional 14 minority individuals participated, but due to the nature of this study, their data were not used. A total of 297 participants completed the entire survey, the remaining did not and their data were not used. Table 1 summarizes the age and gender composition of the participants.

Approximately 1% of the participants had some high school, 12% had high school, 31 % had some college, 4% had a college degree, 16% had master's degrees, and 36% had doctoral degrees. Approximately 4% of the participants did not provide educational level information.

Table 1

The mean and standard deviation of participants' age by gender and group

Group	Female			Male			Total		
	n	M	SD	n	M	SD	n	M	SD
Faculty	29	43.66	9.59	71	49.30	7.96	100	47.66	8.80
Adm.	13	43.69	7.32	24	47.29	9.36	37	46.02	8.76
Staff	80	37.81	9.74	32	39.56	9.03	114*	38.11	9.58
Stu. L.	15	20.60	1.18	14	21.14	1.40	29	20.86	1.30
Total	137	37.32	11.05	141	43.95	11.71	280	40.78	11.81

* Missing cases: 2

Instruments

The instruments used in this study consisted of the White Racial Identity Inventory (Helms & Carter, 1990) and a personal data sheet.

White Racial Identity Attitude Scale (WRIAS). This scale consists of 50 items measuring whites' racial attitudes using a 5-point Likert scale. It is designed based upon issues identified by the white racial identity theorists of the past two decades. Reliability coefficients in four studies have been found repeatedly to range from .55 to the .90's. Additional reliability and validity (i.e. content, construct, and criterion-related validity) information for each subscale is reported by Helms and Carter (1990). They conclude that the reliability and validity data are sufficiently consistent and strong to warrant the usage of each of the five scales.

Personal Data Sheet. Participants reported demographic information including age, sex, education, and position when administered the WRIAS. The category of 4-year college degree was inadvertently omitted from the personal data sheet. Thus, the number of college degree participants indicated above reflects only those who wrote in the category on the personal data sheet.

Procedures

The WRIAS and the personal data sheet were mailed to 865 faculty, administrators and staff (including contract workers). One hundred student leaders were randomly selected from a list of student leaders (e.g. representatives from Greek organizations, residence hall officers, sports team captains, senators and senate officers, and other clubs and organizations).

Results

One-way analyses of variances (ANOVA) were conducted to determine whether or not the respondents' white racial identity attitudes differed with respect to group (i.e. faculty, administrators, staff, and student leaders), sex, age, and education. Significant differences among the groups were found in all stages: Contact ($F(3, 293) = 2.72$, $p < .05$); Disintegration ($F(3,293) = 26.37$, $p < .0001$), Reintegration ($F(3,293) = 19.90$, $p < .0001$), Pseudo-Independence ($F(3,293) = 3.45$, $p = .01$) and Autonomy ($F(3,293) = 7.37$, $p < .001$). Table 2 summarizes the results of one-way ANOVA's and the Scheffe post-hoc analyses at a .05 significance level. Staff and student leaders were found to have higher levels of Disintegration and Reintegration attitudes than faculty and administrators. On the other hand, faculty and

Table 2

Summary of Means and Standard Deviations for the White Racial Identity Attitudes of Faculty, Administrators, Staff, and Student Leaders

Racial Id Stages	Faculty (n=106)		Adm. (n=41)		Staff (n=121)		Stu. Leader (n=29)		Total (n=297)		
	M	SD	M	SD	M	SD	M	SD	M	SD	F
Con.	29.95	5.17	28.78^{a}	3.55	30.85	3.96	28.83^{b}	6.89	30.03	4.76	2.72^{*}
Dis.	18.37^{ab}	5.61	18.93^{cd}	4.87	24.31^{ac}	5.41	24.14^{bd}	6.94	21.44	6.25	26.37^{***}
Rei.	18.82^{ab}	5.24	18.95^{cd}	4.99	24.50^{ac}	6.56	24.34^{bd}	9.36	21.69	6.83	19.90^{***}
Pse.	36.84^{ab}	5.60	36.98^{c}	6.08	35.27^{a}	4.92	33.72^{bc}	7.42	35.92	5.68	3.45^{*}
Aut.	38.99^{ab}	5.62	40.10^{cd}	3.99	36.55^{ac}	4.77	36.34^{bd}	7.18	37.89	5.44	7.37^{**}

a, b, c, & d denote pairs of groups significantly different at the .05 level.

* $p < .05$
** $p < .001$
*** $p < .0001$

Table 3

Summary of Means and Standard Deviations for the White Racial Identity Attitudes

Racial Id	I (n=3)		II (n=35)		III (n=91)		IV (n=49)		V (n=106)		VI (n=12)		TOTAL (n=296)		
Stages	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	F
Con.	31.00	5.57	30.80	4.65	30.12	4.93	29.88	4.68	29.51	4.77	31.83	4.61	30.14	4.53	0.82
Dis.	20.33	5.03^{ab}	25.83	5.43	24.14^{cd}	5.97	19.59^{ac}	4.32	18.20^{bde}	5.85	24.50	2.68	21.11	6.13	17.98**
Rei.	19.00	4.36^{ab}	25.83	5.99	24..67^{cd}	7.84	19.51^{ad}	4.22	18.59^{bd}	5.56	23.75	4.25	21.32	6.48	14.26**
Pse.	42.67	10.12	35.09	4.22	34.24^{a}	5.58	35.90	6.68	37.58^{a}	5.20	34.42	4.23	35.90	5.68	4.84*
Aut.	35.00	1.73	36.22	3.38	36.10^{ab}	5.84	39.39	3.64	39.25^{ab}	5.82	38.50	5.40	38.00	5.14	5.43*

a, b, c, d, e, & f denote pairs of groups significantly different at the .05 level.

I .Some High	IV. Master
II. High School	V. Ph.D.
III. Some College	VI. College

* $p < .001$
** $p < .0001$

administrators were found to have higher levels of Pseudo-Independence and Autonomy attitudes than staff and student leaders.

Men and women significantly differed in their Contact (F(1,293) = 3.92, $p < .05$), Pseudo-Independence (F(1,293) = 5.29, $p < .05$) and Autonomy (F(1,293) = 34.76, $p < .05$) attitudes. In comparison with men, women were found to have higher levels of contact attitude but lower levels in Pseudo-Independence and Autonomy .

Table 3 presents the means and standard deviations for the racial identity attitudes by participants' educational level. Significant differences among educational levels were found in the Disintegration (F(5,290) = 17.98, $p < .0001$), Reintegration (F(5,290) = 14.26, $p < .0001$), Pseudo-Independence (F(5,290) = 4.84, $p < .001$) and Autonomy (F(5,290) = 5.43, $p < .001$). Participants who held Ph.D. degrees were found to have higher levels of Pseudo-Independence and Autonomy attitudes than those who had some college education. Participants who held graduate degrees were found to have lower levels of Reintegration and Disintegration attitudes than those who had high school or some college education. These findings suggest that education has a positive relationship with one's level of racial consciousness.

Although relatively weak, two Pearson Product-Moment correlation coefficients reveal that age has a negative association with the Disintegration ($r = -.23$, $p < .0001$) and Reintegration ($r = -.18$, $p < .01$) attitudes. That is, the older an individual is, the lower the levels of Disintegration and Reintegration attitudes he/she has. In addition, results of two-way ANOVA's did not reveal any significant interaction of the variables (i.e. sex and education) studied.

Discussion

Results of the study suggest that faculty, administrators, staff, and student leaders differed in their levels of racial identity attitudes. If one reads horizontally across Table 2, it is clear that faculty and administrators were found to have higher attitudes of Pseudo-Independence and Autonomy than staff and student leaders. On the other hand, staff and student leaders were found to have higher Disintegration and Reintegration attitudes compared with faculty and administrators. Persons at these stages may approach black people with curiosity, interest, and a sense of naivete or white superiority, particularly in their interactions with and knowledge about blacks. The faculty and administrators' responses indicate an interest in racial similarities and differences, with an intellectual understanding and acceptance of races.

Findings from this study indicate two kinds of interactions present on campus: parallel relationships (i.e. students and staff share the same world views, as do faculty and administrators) and progressive relationships (i.e. faculty and administrators have higher levels of racial identity attitudes than suff and student leaders). According to Helms (1984, 1990), the common theme in parallel relationships is inertia. That is, neither group can function beyond their respective world views. Consequently, they cannot stimulate one another to move beyond their racial identity stages.

Faculty and administrators in a progressive relationship in relation to staff and student leaders can provide information and guidance necessary to encourage staff/student leaders self-awareness and understanding of racial dynamics. However, problems may also arise in progressive relationships with individuals who are close in racial identity stages trying to change one another's racial attitudes, or individuals in lower stages propagating naive racial attitudes or avoiding proper discussion or opportunities to learn about racial matters.

The gender differences found in this study do not seem to support findings and perspectives provided by other investigators in the related area and thus are difficult to explain. Women who have higher levels of Contact attitudes were associated with less racism (Carter, 1990) and with a higher level of comfort when with black individuals (Parker, 1989). However, given the results that more education is positively associated with higher levels of racial identity attitudes and that older age is negatively associated with Disintegration and Reintegration attitudes, it may not be as difficult to conceptualize why women in this study who were younger and received less education than men would tend to have lower levels of Pseudo-Independence and Autonomy attitudes.

The large standard deviations (see Tables 2 & 3) warrant precautions in interpreting the results. Although no interactions were found in this study, variables such as age, educational level, gender and racial identity attitudes tend to be complex. The variance demonstrated by any of these variables alone is not enough to provide an explanation of how participants differed in social awareness, understanding and acceptance because of the within group variations. These support Casas' and Ponterotto's (1991) advocacy that one of the most important processes in multicultural work is the examination of within group or intra-cultural differences.

Implications

The study has significant implications for program development in the area of racial identity training. Many have indicated that racial identity stages are the dimensions to which interventions can be matched to promote or to stimulate a healthy racial environment (Helms, 1990; Ponterotto, 1991). Racial climate refers to the accumulation of the intrapersonal and interpersonal characteristics of the individuals in a particular environment (e.g. a work unit, classroom, teacher-student interaction, cafeteria, and so forth). It is then possible to devise training programs with goals and activities specifically pertaining to the assessed racial identity attitudes of the potential trainees, given the assumption that the trainer(s) are interested in monitoring their own racial identity development.

We are in the process of the publication of a racial identity training resource manual in which additional data analysis and training goals and activities will be included. The training resource manual will be helpful in the planning and implementing of cross-culturally related in-service and/or orientation activities. The following are examples of some of the goals that will be included in the training resource manual :

Contact Stage

- Begin process of recognizing and articulating one's own values.
- Provide knowledge base of one's own cultural heritage and the cultural heritage of minority groups.

Disintegration Stage

- Begin exploration of stereotypes and create awareness of prejudicial attitudes.
- Create discussion opportunities on positive aspects of one's own culture and culture of others.

Reintegration Stage

- Encourage ownership of feelings of hostility and become aware of their impact on minorities.
- Deal with feelings of anger and fear, accentuate positive characteristics of minority cultures.

Pseudo-Independent Stage

- Provide exposure to a variety of racial interactions, moving beyond safety level.
- Creatively supplement intellectual understanding with affective understanding of other cultures.

Autonomy Stage

- Provide opportunities to engage in more challenging interactions with people from other cultures.
- Encourage on-going self-directed involvement in cultural learning and development of skills to promote cultural development in others.

We contend that once faculty, staff, staff supervisors, and student leaders are assisted in coming to terms with themselves, they will be enabled to better interact both socially and academically with students from diverse cultural backgrounds. Thus, the University can provide a positive climate in which members can be stimulated to move beyond their racial identity stage as well as provide the information and guidance necessary to encourage self-awareness and understanding of racial dynamics.

REFERENCES

Axelson, J. (1985). *Counseling and development in multicultural society*. CA: Brooks/Cole Publishing Co.

Barker, N. C. (1986). *Cultural diversity: An expectation for teaching*. Paper presented at the Teaching for Potential Regional Conference on University Teaching, Las Cruces, NM. (ERIC Document Reproduction Service No. ED 279 256).

Bates, J. (1991). Your passport for understanding international students: A three-part workshop series for resident advisors. *Topical Review, 1*(1), 53-59.

Beale, A. (1986). A cross cultural dyadic encounter. *Journal of Multicultural Counseling and Development, 14*(2), 73-76.

Brislin, R., Cushner, K., Cherrie, C., & Yong, M. (1986). *Intercultural interactions: A practical guide*. Beverly Hills, CA: Sage.

Carter, R. T. (1990). The relationship between racism and racial identity among white Americans: An exploratory investigation. *Journal of Counseling and Development, 69*(1), 46-50.

Casas, J. M., & Pontertto, J. G. (1991). *Handbook of racial/ethnic minority counseling research*. Springfield, IL: Charles Thomas.

Goodstein, L. D., & Pfeiffer, J. W. (Eds.). (1983). *The 1983 annual for facilitators, trainers and consultants*, University Associates, Inc.

Helms, J.E. (1990). *Black and white racial identity: Theory, research, and practice*. New York: Greenwood.

Helms, J. (1989). Considering some methodological issues in racial identity counseling research. *Counseling Psychologist, 17*(2), 227-253.

Helms, J. (1984). Towards a theoretical explanation of the effects of race on counseling: A black and white model. *Counseling Psychologist, 12*(4), 153-165.

Howard, E. D. (1987). Extremism on campus: Symbols of hate, symbols of hope. *Christian Century, 104*, 625-626.

Jones, W. T., & Poole, T. (1991). *Racism on campus, A seminar for faculty*. Corapolis, PA: PA Commission for University Ministry in Higher Education.

Jones, J. E. & Pfeiffer, J. W.(Eds.). (1979). *The 1979 annual handbook for group facilitators*, University Associates, Inc.

Jones, J. E. & Pfeiffir, J. W. (Eds.). (1973). *The 1973 annual handbood for group facilitators*. CA: University Associates, Inc.

Kohls, L. Robert (1981). *Developing intercultural awareness*. Washington, DC: Society for Intercultural Education, Training and Research.

Parham, T. A., & Hopkins-Parham, D. (1990, Fall). *Multicultural education: A perspective in search of a real commitment*. Alexandia, VA: Association for Multicultural Counseling and Development.

Pederson, P. B. (1988). *A handbook for developing multicultural awareness*. Alexandria, VA: American Association for Counseling and Development.

Pfeiffer, J. W. (Ed.) (1990). *The 1990 annual: Developing human resources*, University Associates, Inc.

Pfeiffer, J. W., & Jones, J. E. (Eds.). (1971). *Handbook of structured experiences for human relations training*. (Vol. III). CA: University Associates, Inc.

Pfeiffer, J. W., & Jones, J. E. (Eds.). (1973). *Handbook of structured experiences for human relations training*. (Vol. IV). CA :University Associates, Inc.

Pfeiffer, J. W., & Jones, J. E. (Eds.). (1979). *Handbook of structured experiences for human relations training*. (Vol. VII). CA: University Associates, Inc.

Ponterotto, J. G., & Benesch, K. F. (1988). An organizational framework for understanding the role of cultural in counseling. *Journal of Counseling and Development, 66*, 237-241.

Pyle, K. R. (1986). Guiding the development of foreign students. *New Directions for Student Services, 36*, 43-49.

Sabini, N. B., Ponterotto, J. G., & Borodovsky, L.G. (1991). White racial identity development and cross-cultural counselor training: A stage model. *Counseling Psychologist, 19*(1).

Sikkema, M., & Niyekawa, A. (1987). *Design for cross-cultural learning*. Yarmouth, ME: Intercultural Press.

Smith, D. G. (1989). *The challenge of diversity: Involvement or alienation in the academy?* ERIC Clearinghouse on Higher Education, Washington, DC: The George Washington University.

Weeks, W. H., Pederson, P. B., Brislin, R. W. (Eds.) (1977). *A manual of structured experiences for cross-cultural learning*. Yarmouth, ME: Intercultural Press.

Issues Affecting Client-Counselor Relationships in Cross-Cultural Counseling

Marta Aizenman, Ph.D.
Director, Cook Counseling Center
Rutgers University, Cook College

Yvonne Watson, Ed.D.
Dean of Academic Support
Trenton State College

The purpose of this workshop was to contribute to the development of counselors' awareness and sensitivity to clients from different cultural backgrounds by highlighting through exercises and discussion, issues which affect the client/counselor relationship. The present paper is a summary of the main topics presented. In addition, it includes a current bibliography on the subject.

The treatment of culturally diverse populations is becoming more and more and multilingual society. High rates of immigration to this country, declining birth rates of white Americans and increasing birthrates for racial/ethnic minorities are bound to result in dramatic changes in the fabric and texture of this society. Counseling professionals cannot escape this reality and may have to adjust their methodologies and confront their own cultural biases if they want to serve culturally diverse populations more successfully.

Much of the cross-cultural counseling literature notices the underutilization and premature termination of counseling in this country by members of non-western cultures. For example, Sue and Sue (1977) mention that Asian Americans use mental health services at much lower rates than their western counterparts, and when they do so more than 50% tend to terminate treatment after one visit, as compared to the rate of 30% of immediate terminations by members of the western culture.

Many counselors are using therapeutic approaches that show little regard for the role that cultural differences play in clients' lives. The result is that many clients are receiving treatment which is ill-suited to their way of thinking and in conflict with their values and beliefs about human behavior.

Most mental health practitioners would acknowledge that cultural variables cannot be overlooked in the counseling process. However, not many would agree on how cultural considerations should be incorporated into their conceptual framework. For some, cross-cultural counseling means the development of a totally new theory, while others see the incorporation of cognitive skills and sensitivity to the existing methodologies as the solution.

Ideally, one would like to see a well-developed body of personality and therapeutic theory which would incorporate multicultural constructs; however, such a body of knowledge has yet to emerge. For the moment then, in order to serve adequately culturally diverse populations, counselors will need to follow an additive model which incorporates culturally appropriate therapeutic interventions to existing theoretical constructs used. In addition, counselors must examine the relevance of traditional assumptions about human behavior, as well as the impact of cultural differences on the counselor/client relationship.

Limitations to the Traditional Counseling Approach

There is considerable agreement among counselors about the fact that traditional counseling theories and practices are rooted in value sets characteristic of European cultures. These theories place a high value on autonomy, self assertiveness, verbal expression and analytic reasoning, and therefore they may not be applicable to cultural groups where different qualities are given priority.

In some cultural groups the needs of the family take precedence over individual concerns. In such cultures, the person will tend to surrender his/her wishes to family decisions. Those who hold a traditional western view which values independence and autonomy may see this behavior as dependent or immature. Similarly, they may emphasize assertive behavior that stresses the rights of the individual to clients who hold a collective group orientation in which the group has a higher value than the individual. Such a conflict will, undoubtedly, result in premature termination from counseling.

Traditional counseling relies on verbal expression of emotions and feelings. However, there are cultures that place a high importance on restraint of feelings. For instance, self disclosure and the display of emotion are generally considered signs of weakness in Asian cultures. This and their cultural emphasis on politeness and agreeableness may present problems for western counselors who may assess Asian clients as inhibited, repressed or unable to express their feelings.

Cultures also differ in their communication patterns. While the western culture emphasizes verbal expression, for others, non-verbal aspects may be the most important component of the communication (Herring, 1990). In African American cultures, for example, a greater emphasis may be placed on how something is said versus what is said. Some Latino cultures value engaging in small talk which may be viewed as "beating around the bush." Such an interpretation might lead a therapist who lacks cultural sensitivity to conclude that the client is resisting, when for many Latinos this is an important step in establishing rapport.

Many therapists base their counseling approach on the assumption that the overall goal is personal knowledge and that this insight then leads to the removal of the symptoms which prompted the treatment. However, some cultural groups view therapy in a different way. Therapy is in some cultures confined to the resolution of a specific problem. Clients of these cultural groups look for a short term focus oriented therapy and will drop out of a counseling treatment which attempts to go beyond remedy of the problem they initially presented. Other groups (Hispanic cultures, for example) generally view religion as the answer to all problems and seek solace for their problems through the church. When they do engage in formal psychotherapy, they often present a fatalistic attitude as "it is God's will" which may be viewed as resistance in traditional psychotherapeutic approach.

Another factor in the underutilization and premature termination of counseling by clients from non-western cultures is the different attitudes that are held towards therapy. In some cultures, seeking counseling may be viewed as a sign of weakness. It seems likely that among immigrants to this country, the higher the level of their acculturation, the more receptive they will be to traditional psychotherapy. Moreover, it is also possible that the extent to which a non-western client seeks counseling services is related to the degree of identification with their own culture. Austin, Carter, and Vaux (1990), for example, found that the attitude of Black American students towards counseling and counseling centers is inversely influenced by their level of racial identity: "Blacks who have a less developed Black identity as compared with those who have developed this identity, seem less likely to see counseling as effective or useful to them" (Austin et al., 1990, p. 241).

Interference of Cultural Background in the Client-Counselor Relationship

The therapeutic relationship that develops between client and counselor has been seen by many therapists as one of the main factors in the healing process that takes place during counseling. For a counseling relationship to have a positive effect, the client should feel comfortable to discuss any concern with the counselor, trusting that the responses received will be motivated exclusively by the therapist's wish for client's well being. Counselors are expected to set aside their personal perspective when relating to the client's world. The formation of any counseling relationship is not easy; however, lack of attention to cultural factors may make it even more difficult.

Clients may have different reactions to their counselor, according to the degree of similarity in their cultural/ethnic background. A perceived similarity may elicit immediate feelings of rapport in some clients; however, for those who are struggling with issues involving a conflict with their cultural identity, the therapist's shared background may engender fears of disapproval and guilt. Another danger is that the perceived resemblance may reduce the client's motivation to explain his/her feelings since the client may assume that the counselor has a natural understanding of them.

A shared background between a counselor and client may also have an effect on the therapist's behavior. The therapist may expect more of this particular client than of other clients. For example, therapists of Korean, Black and Hispanic origin acknowledge that they become more anxious and expect better progress from clients who belong to their own culture (personal communications).

On the other hand, the therapists may try to ignore their cultural similarity with certain clients and thus avoid discussion of any issue related to clients' racial or ethnic backgrounds. John Calnek (1970) observed that this situation tends to emerge when therapists fear that acknowledging the cultural identity they share with a client will result in the dissolution of their "professional image." At the other extreme, counselors may over-identify with their clients, centering exclusively on cultural topics whether or not these are issues for the client.

A different set of issues emerges when the counselor and client belong to different cultures. In these situations, for example, there is always the possibility that the treatment will be contaminated by the stereotypes held by both counselor and client. It is also possible that the therapist's curiosity about the client's culture will color the content of the sessions. For instance, Devereux (1953), a psychoanalyst with an interest in American Indians, wrote of his difficulty in restraining his curiosity when treating clients from this culture. Clients may resent this kind of inquiry, or provide the requested information as a way of pleasing the counselor or avoiding the discussion of difficult issues.

Several authors have pointed out that counselors treating clients from minority groups who have been mistreated by members of the counselor's own culture may be motivated by feelings of which they are not aware (Gerkin, 1986; Mizio, 1977). For example, a counselor may unconsciously treat a client as a member of an inferior group, a behavior insulting from attitudes learned within the counselor's own cultural experience. Others may experience feelings of guilt for the damage that members of their cultural group may have occasioned to those of their clients' cultures and take it upon themselves to compensate by offering clients longer sessions or by becoming overly concerned and sympathetic. They may also attempt to portray themselves as above and beyond cultural influences and expect their clients to behave in a similar manner.

When clients and counselors belong to different cultures, the issue of mistrust may become one of primary relevance. Clients may avoid revealing many of their personal concerns for fear of misrepresenting their culture. Furthermore, the perception that the client has of the counselor's culture may raise fear or suspicion of the therapist. This may be more prevalent in situations where the counselor's and the client's culture share a history of negative relationships.

While many studies show the demographic variables such as sex, race and socioeconomic status affect the attention rate and type of service received by those seeking treatment, not enough attention has been paid to the biases of the counselors as an explanation for this phenomenon (Garfield, 1978). In order to overcome these biases, it seems of crucial importance that counselors become aware of their own values and assumptions about human behavior. It is equally important for them to become aware of their perceptions of other cultures. In doing so, special attention should be given to the impact that early life experiences with individuals of different cultures may have had on one's present behavior and feelings (Jones & Gray, 1983).

Strategies to Improve Cross-Cultural Counseling

The very nature of the counseling relationship suggests that it will never be free of problems. However, there are several strategies that culturally aware counselors can utilize in order to prevent their perceptions and concerns from impeding the treatment process.

In general, it is important that counselors understand their cultural values and beliefs and beware of biases and conflicts that they may experience with clients of cultural backgrounds which are similar to or different from theirs. All too often, mental health practitioners behave as though they are immune from the ills of racism and cultural biases that prevail in this society. The first step in ridding oneself of such ills is to acknowledge their existence.

Specific strategies that counselors may choose to follow include:

Become knowledgeable about the culture of the client and recognize ingroup cultural heterogeneity. Try to operate within the values of the client's culture and pay attention to possible conflicts that may result from the transculturalization process.

Assess the effectiveness of the therapeutic approach considering the client's cultural background. Interpret the client's behaviors within their cultural context.

Examine the degree to which the counselor's comfort in working with the client is related to the cultural group to which he or she belongs. Explore the reasons for those feelings and develop plans of action to cope with unusual levels of discomfort. For example, do not fear acknowledging misunderstanding resulting from cultural differences; accept limitations and refer clients when biases are strong enough to impede the therapeutic process.

Concluding Comments

Although it is important to be aware of values and the beliefs that may be shared by members of specific groups, it is important not to lose sight of the fact that there is a great deal of diversity within every cultural group. To generalize cultural characteristics to all members of a group is as much a concern as to ignore the importance of culture.

The cross-cultural counselor should take every opportunity to remove cultural filters and attempt to understand the world from the perspective of the client. This entails the complex task of learning and understanding as much as possible about one's own prejudices and biases as well as learning about other cultures.

References

Austin, N., Carter, R., & Vaux, A. (1990). The role of racial identity in Black students' attitudes toward counseling and counseling centers. *Journal of College Students' Development, 31*, 237244.

Calnek, M. (1970). Racial factors in the countertransference: The Black therapist and the Black client. *American Journal of Orthopsychiatry, 40*, 3946.

Herring, R. (1990). Nonverbal communication: A necessary component of cross-cultural counseling. *Journal of Multicultural Counseling and Development, 18*, 172179.

Jones, B. E., & Gray, B. A. (1983). Black males and psychotherapy: Theoretical issues. *American Journal of Psychotherapy, 37*, 7784.

Sue, D. W., & Sue, D. (1977). Barriers to effective cross-cultural counseling. *Journal of Counseling Psychology, 24*(5), 420429.

The Integrated Cultural Influence Protocol (CICI): Relevance of Culture in Clinical Work with Hispanics

Carmen I. Vazquez, Yvette Caro, and Alina M. Clavijo-Passik
Bilingual Treatment Program-Clinic
New York University-Bellevue Hospital Center

The main focus of this paper is to help clinicians and other mental health professionals distinguish culturally normative behavior from psychopathology when working with Hispanic patients, especially those who are not acculturated to the main Anglo culture. Secondly, this paper seeks to assist Hispanic mental health professionals in organizing cultural concepts such as acculturation, machismo, sex roles, religious beliefs, family structure, etc. that are repeatedly described in seminars and papers. Organization of these concepts into a coherent and pragmatic vehicle for everyday practice has long been an interest of the Bilingual Treatment Program (BTP) Clinic. The BTP-Clinic was founded to provide comprehensive clinical services in mental health to the Hispanic population at New York University-Bellevue Hospital Center. This end is now being achieved through the development of the BTP-Clinic Integrated Cultural Influence Protocol (CICI).

The CICI was developed by the authors at BTP to help bilingual-bicultural trainees integrate theory and clinical work. It represents a pragmatic approach to heighten trainees awareness of the need to distinguish 'culturally different' from pathological thoughts, affects, and behaviors. Clinicians can err in two directions. That is, they may find it difficult to accept culturally sanctioned behaviors, thoughts and affects, thus incorrectly labelling them pathological. On the other hand, they may not identify such behaviors as dysfunctional when appropriate. Distinguishing psychological manifestations which are differently culturally defined, from true pathology can be a formidable task. This task requires considerable training even for the bilingual-bicultural professional.

The CICI's seven modules help clinicians establish demarcations, at least hypothetical ones, for heuristic purposes, which tease apart culturally normative thoughts, affects and behaviors from pathological ones. Additionally, it ensures that clinicians consider and integrate all culturally relevant material when evaluating, diagnosing or treating a Hispanic patient. The over-riding purpose of the CICI is to maximize the effectiveness and appropriateness of services rendered to the Hispanic population by providing these within the cultural context of the patient's internal life and in their primary language. CICI's seven modules will be discussed and clinical vignettes will be included to illustrate each of these areas where appropriate.

CICI Module I: Diversity of the Hispanic Population

Diversity within the Hispanic population itself is often greatly underestimated. Accepting that each Latin American country has a different socio-political experience is the first step toward granting diversity its appropriate consideration. For instance, in the U.S. mainland the Mexican-American experience is very different from that of Puerto Ricans. Two factors which can contribute to a group's differing experiences are proximity to country of origin and citizenship or political status. In the current example, although both groups have U.S. citizenship, their differences are reinforced through proximity to their countries of origin. That is, this proximity, and the citizenship status, permit constant interaction with relatives and friends in countries of origin and thus more readily maintains their culture. The process of acculturation to the Anglo culture for Hispanics living in the United States for instance, acts as a vehicle bringing change to the culture they have brought with them. Therefore, Hispanics living in the continental United States are by definition different than those Hispanics living in their countries of origin (and Puerto Rico) because of their lack of exposure to the Anglo culture.

The importance of cultural diversity within the Hispanic culture can also be seen in the varied histories of each of the Latin American countries. These diverse historical underpinnings can inform the clinician about the influence of cultural differences. For example, among the countries of the Caribbean, African heritage mediates the definition of concepts that are often diagnostically relevant, such as *mal de ojo* (evil eye), *hecharle una brujeria* (bewitch), *susto* (a malevolent intrusion which has taken possession of a child). Such diversity makes it difficult to group Hispanics in a way that captures their group and intragroup differences.

Historically, Latin American countries varied widely in the types, lengths of stay, power and influence exerted by different migrations, immigrations, colonizations and invasions. To varying degrees, then, each country has Indian, African, European and North American influence which result in very distinctive subgroup differences. For instance, although quite different from each other, the countries of the Caribbean share African, Indian, and Spanish heritages. Other countries such as Brazil, share Portuguese and African heritages, while countries such as Argentina have more of a European heritage. Differences in skin color further diversify these groups, often resulting in emotional divisions among the subgroups themselves. Furthermore, the Spanish-speaking countries forming what is called Latin America (the twenty-one republics plus Puerto Rico), include countries in the North, South and Central American region and in the Caribbean. They have marked differences among their populations based on their heritage, socio-political history and socioeconomic status vis-a-vis each other and the international community.

It would be a great disservice to the patient to ignore the importance of diversity in clinical practice. Indeed, the clinician is responsible for educating him/herself about the patient's specific cultural subgroup. While this can be easily accomplished through readings, a more useful approach is to have the patient teach the clinician about his/her own culture. Patients are usually very willing to help the clinician understand them better. The following is a brief excerpt of a session where a Peruvian patient tries to explain her specific Hispanic identity to the clinician. In this example the patient teaches the clinician about diversity within her culture and how this has affected her identity.

> Patient: It's very complicated. I think I am a person who is in fact in a white world, but I have never felt a part of what it is like to be white, from a cultural point of view in my country. My mother comes from a region in Peru where the inhabitants that stayed in the high altitudes that are in the center of the country, are the ones that consider themselves of Andean or Indian ancestry [these people are of Spanish and Andean ancestry]. The Incas were few, but they lived in the mountainous region by the coast [and are now a mixture of Incan and African ancestry]. However the Indians [Andean not Incan], do not see themselves as Indians. This is where I think that there must be a schizophrenic problem. The people look at themselves in the mirror and say "I am a Spaniard" and I say these people are crazy (because they are black). Until they leave Peru and they go to a different context and they can't deny themselves. My [maternal] aunts felt that I was darker skinned because of my father [who was Incan and African] so they treated me differently and I didn't like that. On the other hand among my father's people I was the lightest. It was very painful, because they used to treat me badly, very bad.

Although clinicians need always keep diversity in mind, fortunately, there are a few characteristics seen across many Hispanic cultures. To appease the clinical mind's need for nosologies we may very loosely refer to these as "universals." These are delineated in the second module, as Hispanic beliefs and values.

CICI Module II: Hispanic Cultural Values and Beliefs

Cultural values can be divided into three primary areas, traditional, contemporary and transitional (Bernal & Alvarez, 1983). The discussion in this section will focus primarily on traditional values and beliefs which are often seen in the presentation of Hispanic patients today. Garcia-Preto (1982), among many other writers, highlight the following traditional cultural values as having significant import in the lives of Hispanics: *respeto* (respect), *personalismo* (a value on personal contact), and *obligación a la familia* (primacy given to the needs of the family over those of the individual). These and other characteristics will be discussed below with clinical vignettes as examples where appropriate.

In Hispanic cultures, one of the most basic elements of interpersonal relationships is *respeto*, respect. This concept transcends social classes. It denotes an unspoken code of conduct or discipline to be observed in all situations. Included in the connotation of *respeto* are obedience, dependence, passivity, control of aggression, and appropriate social/interpersonal distance. For example, in treatment, a Hispanic patient may be unable to explore confrontations used as therapeutic interventions because of the codes of conduct dictated by *respeto*. In this instance the value of *respeto* does not allow the patient to breech the culturally accepted rules of interpersonal communication mediated by age, sex, and social/professional standing. In such a case, the therapist may be called upon to teach the patient about the various kinds of communications that psychotherapy entails, and allow the patient to try these new communication patterns at a pace that is non-threatening to him/her. At the same time however, the therapist cannot loose sight of dynamic issues which may influence therapeutic interactions.

Personalismo is a term that denotes a preference among Hispanics for a person-oriented approach to human relationahips, even when these are defined by a system. In a hospital or other clinical setting *personalismo* will mean that patients seek personal contact and individualized attention. Perhaps the most classic examples of this at the BTP-Clinic are the "drop-in-missed-appointment-patients." These are patients who missed an appointment and did not call to cancel or re-schedule their session. They come in one day, sometimes, but certainly not always, when they have an appointment in another part of the hospital, and request to re-schedule in person with their particular clinician. The clinician is most often unavailable and therefore the patient is simply given an appointment for another day. The patient could have resolved this over the telephone, as is explained to all patients at the Clinic. Understanding the value of *personalismo* informs the clinician that the patient prefers to make the new appointment in person, rather than on the telephone or through a third party. Such behavior may also have another meaning within the therapeutic relationship. However the clinician must distinguish between transference and cultural norms from an informed perspective.

In addition, dependence, and independence are important aspects of the Hispanic culture's value system that deserve special mention here. It is important to understand normative behavioral definitions of dependence and independence in Hispanic culture. One basic element which Hispanics bring with them to the U.S. is familial interdependence. Interdependence among extended family members, rather than autonomous individual functioning, seems to be the norm. Canino and Canino (1980) suggest that if Hispanic families are measured on a continuum of differentiation they would fall nearest the enmeshed end. It could be said that independence as it is practiced in the Hispanic family, is less mediated by age than by sanctioned cultural milestones. For instance, Hispanic children from traditional families are expected to reside in the parental home until they marry. At such a time they are considered independent adults. The are now married and will establish their own home and family, which emancipates the individual within the family and the community. This stands in contrast to the Anglo application of independence which adheres to a chronological definition which is presumed to reflect maturation and development.

The adult status given to married individuals in Hispanic culture cannot be said to be equivalent to what we usually think about from an Anglo perspective. For instance, adult family members must still observe the value of *obligación*. *Obligación a la familia* refers to the over-riding primacy given to the needs of the family as a unit over those of the individual. Sacrifice is a reflection of the value of *obligación*. That is, parents are expected to make all kinds of sacrifices for their children who in turn must show gratitude by assuming responsibility for younger brothers and sisters and/or for the parents in old age. The "good mother" is expected to make sacrifices for her children throughout her life.

This suggests then, that clinicians need to be wary of labelling a patient's culturally normative behavior as pathological. For instance, dependence, as reflected in close proximity and high frequency of interaction with the family of origin, does not necessarily imply pathological enmeshment. The following excerpt from a group psychotherapy session shows a beginning trainee's reaction to frequent interaction between a 49 year old patient and her mother:

> Patient: When I lived with my husband we sometimes had little problems because after work, I would go directly to my mother's house. Then after I had spent a little while with her I would go to my house. That was almost every day.
>
> Therapist: Wow! For how long did you do that?
>
> Patient: Until she left.
>
> Therapist: When was that?
>
> Patient: Three years ago.
>
> Therapist: You had contact with your mother every day.
>
> Patient: And on the day that I couldn't I would call her on the phone.

The clinician's reaction clearly underscores her surprise at the patient's behavior. Rather than pathological, however, the patient's behavior is culturally normative. Therefore the clinician's reaction exemplifies a significant value difference between herself and the patient. This may reflect different levels of acculturation to the majority culture between patient and clinician.

Although the historical information in this particular case argues against labeling this patient's behavior as dysfunctional, it is important to realize that the same behavior under other psychological circumstances could be pathological. While a behavior may not be etiologically pathological it may become contextually so. If a behavior, even if normative in the culture of origin, is perpetuated despite a significant emotional cost to the individual, it should be considered pathological. Implied in this notion of health and pathology then is the dynamic relationship between culture and the family. For example, in the following excerpt from a women's psychotherapy group we see how a patient is able to discontinue her culturally normative behavior (caring for her elderly mother who now lives in Puerto Rico) when this would be detrimental to her overall well-being.

> Patient: I'd like to spend the last few years she has left, near her. I ask that God grant me that. If my health improves, I will go. I know that getting the treatment will not be so easy over there as it is here. So I will not go, no matter how much it hurts me.

Values such as *obligación a la familia* and sacrifice can become burdens in a culture where individual achievement is prized above all else. At the BTP Clinic, we have found this to be a common presenting problem.

Religious and spiritual practices or beliefs also form an important part of Hispanic culture. In Latin America religious beliefs and spiritual practice (apart from or in addition to the three major religions) include Santeria, a religion primarily practiced in Cuba and Brazil; Espiritismo, mainly practiced in Puerto Rico and the Dominican Republic; and Voodoo, practiced in Haiti. A clinician who is familiar with these beliefs and practices will be better able to understand their relationship to level of pathology. In other words, a patient can have these beliefs and be psychotic, but having them doesn't necessarily indicate psychopathology. Religions whose beliefs focus on spirits, the supernatural, and the magical, are sometimes adhered to by Hispanics and can easily interfere with the proper diagnosis of a patient. In particular, they can be confused with pathology and challenge a clinician's understanding of a case. The clinician should always inquire about a patient's specific religion and be respectful of its tenets.

Module III: Family Structure

This module is intended to attune the clinician to the central importance of the family in Hispanic culture. Although some of the concepts presented below will overlap with those presented in other modules, the integral importance of the family in Hispanic culture makes clear-cut distinctions artificial. For the sake of brevity and clarity then, only a brief presentation of this complex material follows.

Hispanic family structure generally adheres to an extended family model. That is, one often finds several generations of one family living together, and if not together, in close contact with one another. This of course stands in stark contrast to the Anglo nuclear family structure. Hispanic families are hierarchical and patriarchal. In practical terms, this means that the father is the head of household, that the woman has only reflected power as a wife, but power in her own right as a mother. One issue which places a stress on this usual extended family structure is migration. Migration/immigration for economic, political, or other reasons most often results in the splitting apart of the extended family. This impacts at both the individual and the family unit level. The many functions served by the extended family members within the family as a unit are disrupted. This in turn disrupts the roles and functions of the individual members. When the roles and functions of individual members within the family are disrupted, or better, we should say affected, so is the individual's overall functioning. That is not because the individual is enmeshed or does not have an autonomous sense of self, but rather because the values, norms, customs and behavioral expressions of all of these, which make up his/her identity are different than what we define from an Anglo perspective as "individuated" or "independent." It should be noted here that considerable diversity exists with respect to family structure both between and within "nationality-cultural" groups. As indicated throughout this paper, then, the patient will serve as the best source of information about how well, and in what manner, their family fits its reference group's particular cultural schema.

Module IV:
Migration and Immigration

Migration is a stressful transition which entails many different losses, including the loss of one's homeland, the loss of family and friends, and the loss of that which is familiar (e.g., culture, food, music). To cope with the stressors of migration, many individuals and families manage to establish and maintain a relative moratorium on the process of acculturation and accommodation for months. They cling to the old country's norms and refuse to engage with the new environment. Over time however, individuals will manage to mourn what has been left behind and integrate it constructively into a blend of old and new. For them, the fantasy of returning has collapsed under the pressure of the new reality, giving way to the beginnings of acculturation. For these individuals, the positive side of the experience will outweigh the disruptive nature of the stress, and they emerge from this process of acculturation some two to three years after migration—with new strengths (Sluzki, 1979). However, immigrants can become fixated in the initial stage of mourning (conserving the old culture, denying the loss). These patients will often present with symptomatology

BEST COPY AVAILABLE

which can be traced to their difficulty in acculturation.

Sluzki (1979) suggests that because of the disruptive nature of migration, the clinician particularly take certain factors/aspects of the migration into account. For example, he/she should question whose decision it was to migrate, and the reason for migration, as part of the history taking process with the Hispanic patient. Also the vicissitudes of these aspects of migration in everyday life must be taken into careful consideration. For example, do the family members consider their stay in the U.S. a temporary one? In what way is their everyday behavior part of a plan which takes into account absent family members? These questions are an integral part of the history of any "cross-cultural" patient. Feelings about absent family members and how this impacts on the individual's adjustment to life in the U.S. and the development of his/her identity are also relevant questions. The way this "forced" separation interferes with usual cultural traditions is an important related question. For example, the caretaking of elderly parents, and grieving and mourning processes can also be disrupted.

An important tradition which can be disrupted, is that of the extended family getting together and celebrating the holidays. The union of the family for these rituals is of central significance in Hispanic culture. While they are important in any culture, there is in Anglo culture a lot of flexibility and many acceptable ways in which to celebrate a holiday: with one's nuclear family, with friends, with the family of friends, on vacation with your friends and spouse, etc. In Spanish, one says that I am spending the holidays *en familia*, that is among, not with one's family. This is an important semantic difference that we believe expresses an important cultural difference. In English, one would say I'm spending the holidays with the family or with my family. However in Spanish one could simply say I'm spending it *en familia* meaning among, or really, in family, almost as if it were a state of being. Furthermore there is consensual understanding within the culture—everyone knows what you're talking about when you say that. This expression, *en familia*, captures a fundamental difference in the way individualism, and indeed individuation, is defined in Anglo versus Latino or Hispanic culture.

Module V: Acculturation

The fifth module in the protocol concerns assessment of the patient's level of acculturation. This adaptive process of accumulating and incorporating the customs and knowledge of a new culture is termed acculturation. It is expected that an individual's ability to achieve this imperative yet ambitious goal will be mediated by his/her coping mechanisms, particular assets and vulnerabilities, and, perhaps most important, the particular meaning and interpretation that has been placed on the migratory process and its resolution by the individual. Initially, a person may respond to the separation from their country of origin by clinging rigidly to the original culture. This is an adaptive and effective way of soothing negative affects associated with the sense of loss that the act of migration can activate. In the normal course of events, this represents the initial phase of mourning what was lost, and coupled with the passage of time, it gives way to an acceptance of the new culture.

Intrinsic in this integration of culture of origin and host culture is the rejection of certain aspects of the culture of origin. One of the consequences of acculturation, then, is acculturation stress. Many variables play a role in this stressor. Primarily, these are age and education/SES. Thus, degree of acculturation will vary, not only according to an individual's psychological makeup and cultural development, but according to demographic and migration related variables. Consequently, variations in acculturation can be expected among those whose social experiences are comparable. This variable rate of acculturation amongst family members can cause significant conflict, and hence stress. This variable rate will affect the family system by causing a considerable gap between the levels of acculturation of, say, a mother, and her adolescent male children. Therefore, we may see conflict between these two. The relationship between SES [prior to migration and current] and level of acculturation has been well established. Social class operates within and between cultures in influencing an individual's exposure to cultural information, values, and norms. As social class rises, accessibility to diverse elements in society increases (Hollingshead and Redlich, 1958). These factors are linked to the rate and form or path which this process takes.

Immigration and migration often cause shifts in culturally normative relationship patterns (sex-roles) thus contributing to the emergence of conflicts. Couples undergoing acculturation often experience a period of turbulence in their marital relationship when the wife's entry into the work force shifts the equilibrium and rules of the relationship from a traditional role relationship to a more egalitarian one. For example, consider the following excerpt:

> Patient: He doesn't accept the change. What he wants is to have me submissive, without the power to make decisions, without any power. Tied to him. To do whatever he says, whatever he does, see, because that's what

happened when I started working, he did that to me, he beat me up.

Therapist: When you started to work?

Patient: It was because of the changes that I started to make, I bought clothing, and I lost weight, really I became how can I tell you, I looked good. I started to buy clothes and giving to my daughter and then he beat me. Then he took away my food money. The little bit that I earned I had to give to the house. What he took away from me he used to drink.

Module VI: Cultural Identity

For the sake of clarity it is important to tease apart the following three concepts in this module: 1) the make-up of the individual's internal life; 2) the cultural norms of their culture of origin ; and 3) the cultural norms of the host culture. When discussing individual development, the principles expounded are assumed to define universals across cultures. That is, underlying object relations theory is the assumption that the development of object relations transcends cultural boundaries. This does not deny however, that an individual's internal life develops within a cultural medium. Sometimes clinicians treat patients as if they are acultural. Some clinicians err in the opposite direction however, and conceive of their (Hispanic) patients as if they were devoid of internal life. In the diagnosis and treatment of the Hispanic patient, as with any patient, then, the quality of early object relationships must be considered. In describing the personality of a Hispanic patient, as with all patients, the clinician per force discusses the influence of culture on individual development.

This brings us to the second concept; normative behavior in the culture of origin. As the above suggests, it is important for the clinician to be familiar with the normative behaviors of the patient's culture of origin since these form the medium within which individual development has taken place. Additionally, in the adult patient normative behaviors become particularly important in the initial assessment and diagnostic phase. During this phase the clinician is particularly attuned to the distinction between the "healthy" and the "pathological." One of the tasks of this phase is to discriminate between culturally idiosyncratic "healthy" and "pathological" behaviors. The persistence of some of these culturally specific behaviors in the new culture may be dysfunctional. That is, some normatively healthy behaviors may now have become contextually pathological. This brings us to the third and final concept in this module, the influence of the new culture on current functioning.

Finally, this last concept indicates to the clinician the importance of considering the impact of the new cultural medium on the individual. It is important to keep in mind that the individual's internal world is subject to transformations throughout his/her lifetime. However, for children or adolescents, who are at more malleable stages, the cultural medium may impact more strongly on the development of their identity. For example, Dominican adolescents born in the U.S., upon visiting the Dominican Republic, are often discriminated against and rejected, being placed in a derogatory position. A special taxonomy has been created to reflect this derision. They are called "Dominican Yorks" and *Cadenudos*. It would follow that from their interactions with others, people's perceptions of them, and their sense of themselves as Dominicans, and what that means will be affected. There is also similar taxonomy applied to Puerto Rican adolescents who are referred to as "Newyoricans." In these two groups we see the relevance of cultural factors in the dynamic interaction between the medium and the development of internal life. The adult Hispanic immigrant on the other hand, comes to the host culture with an established identity. As indicated above, this identity may have been "healthy" or "unhealthy" in the culture of origin. Adaptation to the new culture may involve modification of this identity. An identity which has been established in one cultural context then, may have to be modified in order to function within a new culture.

Psychological problems and impairment of life functions begin with the individual's inability to adapt to or cope with the demands of his/her life situation. One way in which the three concepts delineated above are intertwined is clear in this instance. That is, failures of adaptation and the ensuing dysfunctional behavior inform the clinician about ego functioning and the quality of primary object relations. When individuals are faced with environmental circumstances that are different from those to which they are accustomed, and that exceed their current ability to effectively implement their goals, maladaptive behavior may result (Personal Communication, Gonzalez 1986). One presentation of these difficulties, in our experience, has been the use of externalization, by blaming the culture for intrinsic characterological problems. Another presentation is that of non-specific symptoms which are related to the dissonance between aspects of the culture of origin and the new cultural milieu. In this case the clinician helps the patient to integrate those aspects of the two cultures.

Module VII: Language

The seventh module in the protocol concerns language. Communication involves two different thought-emotional-worlds. It is through language that we communicate our ideas, thought, beliefs, perceptions of self and others, and the affective components connected with this inner world. Each language has its own unique linguistic method to convey the individual's inner world, that is its own semantic, phonemic, grammatical structure, as well as the infra-linguistic components such as pauses, tone of voice, the use of uhms, which are considered organizers in the conversation, mannerisms of speech, etc. Cultural beliefs and personality are also interwoven in this inner world and therefore expressed in speech. It goes without saying that the patient should decide what language the therapy will take place in. Moreover, the therapist must be aware of the defensive use of language, and be ready to intervene at such points. This is usually noted in instances of language switching. Clinicians see, and patients report, a difference in the level of expressed and experienced affect in therapy when affect laden material is discussed in the patient's first language (e.g. Spanish) as opposed to a language learned later. It follows then, that we sometimes see language used in a defensive manner. For instance, when dealing with affect-laden or conflict-laden material a patient may begin speaking English in order to gain some emotional distance and use the language to organize a powerful emotional experience. Consider the following excerpt.

> Clinician: Right now you spoke a little in Spanish, and before you said some things in English. Why do you think that happens?
>
> Patient: Yes. Because all of these feelings are more from this culture. To me therapy is more from here (American culture). People here talk too much about themselves. In English it is more natural and easier for me to talk about myself—about how I feel. It's much harder in Spanish to talk about these things. In Spain we have a saying, *A llorar a las palmeras*. This expression means that when you must cry you should do so with the palm trees.

Module VIII:
Transference Countertransference

An important part of the therapeutic process is the examination of the impact of culture on transference and countertransference within the therapeutic dyad. This section will summarize some of the general transference and countertransference issues which one notes in the treatment of Hispanic patients when paired with Hispanic clinicians.

The most common transference issue, when a Hispanic patient is paired with a Hispanic clinician, is the unhealthy identification of the patient with the clinician. Patients can become embroiled in a "it's us against them" posture. In this case we also often see the emergence of class and social issues in the transferential relationship—a "you sold out, you are really one of them" attitude towards the clinician. Other than this deviation, transference issues are fairly universal, with the therapist becoming any of the objects in the patient's life (e.g. "bad mother"). At the BTP-Clinic we have found that certain countertransferential issues are particularly common. The three most common countertransferential issues with a Hispanic clinician treating a Hispanic patient are denial of pathology, overidentification with the patient, and rejection of the patient. In denial of pathology, the clinician makes an error of using culture to explain pathology, while instead culture should be used to understand pathology. Overidentification with the patient is closely related to this. The sharing of cultural ties and/or "outsider" life circumstances can result in a pathological joining with the patient. Finally, the clinician may reject the patient. This may occur for various reasons. Most usually it is related to issues of a narcissistic nature. For instance, the clinician's idea and accompanying feeling that he/she is Hispanic too, and made it, so why can't the patient. It is clear from this instance, then, that the clinician's sense of self as "Hispanic" and the way in which the culture defines his/her "professional" identity will impact directly on the form counter-transference will take.

Another common countertransferential dynamic is the clinician's need to mask ignorance of particular cultures or regionalisms, so as not to appear incompetent. In fact, patients most often respond in a positive manner to queries about their specific cultural or linguistic experience. One could go as far as to argue that such interaction can serve to establish rapport and make the patient feel that the therapist is genuine in his/her attempts to understand the patient.

Additionally, clinicians at the BTP-Clinic often report feeling that they have to give something concrete to Hispanic patients. Consequently, the clinician often falls into the trap of giving advice when advice is not required. Most clinicians report that this issue is not prominent in their treatment with Anglo clients. This may be related to the view in Hispanic culture of the person in authority, in this case the clinician, as an expert. For the most part, Hispanic patients lack experience with mental health services. Generally, these patients have greater exposure to medical services. Therefore, it may be that Hispanic patients apply the medical model to their mental health treatment in order to organize their experience. We have observed that the Hispanic clinician also believes to some extent in functioning as a physician who gives something concrete. That is, the clinician's countertransference reflects a frustrated need and wish to provide the culturally appropriate remedy. This seems to suggest that in the identity of both patient and clinician there is a sense of this relationship as being between healer and infirm. These role definitions can be viewed as culturally proscribed behaviors. To a certain extent this stands in contrast to the psychodynamic notion of the therapeutic relationship as an evolving process. Although psycho-dynamic psychotherapy has defined parameters and behaviors, they are designed to facilitate rather than limit the evolution of the transferential relationship. The application of such a cultural model as described above limits the possible interactions at least on the part of the patient, and may, due to countertransferential issues, limit it on the part of the clinician.

In a positive view, culture can be used as a catalyst in the therapeutic dyad. For instance it can facilitate the formation of a therapeutic relationship, the joining with a patient. In order to establish and maintain an effective therapeutic relationship, the clinician should understand the patient's cultural style of forming trusting relationships, particularly helping relationships.

References

Bernal, G., & Alvarez, A. (1983). Culture and class in the study of families. In J. Hansen & C. Falicov (Eds.), *Cultural perspectives in family therapy*. Rockville, Maryland: Aspen Publications.

Canino, I., & Canino, G. (1980). Impact of stress on the Puerto Rican family: Treatment considerations. *Orthopsychiatry, 50*(3), 535-541.

Garcia-Preto, N. (1982). Puerto Rican families. In M. McGoldrick, J. Pearce, & J. Giordano (Eds.), *Ethnicity and family therapy*. New York: Guilford.

Hollingshead, A., & Redlich, F. (1958). *Social class and mental illness*. New York: John Wiley.

Sluzki, C. (1979). Migration and family conflict. *Family Process, 18*(4), 379-390.

A Developmental Approach to Group Therapy with Acting-Out Hispanic Adolescent Males

Fred Millán
State University of New York/
College at Old Westbury Sunset Park Mental Health Center of the Lutheran Medical Center

Jane Chan
New York City Board of Education
Teachers College, Columbia University

This manuscript describes group therapy with acting-out Hispanic adolescent males and suggests that it is an effective psychotherapeutic modality in treating this difficult population. It also addresses the development of personality during adolescence according to Erikson's psychosocial stages; Hispanic family dynamics and gender roles; group therapy as a pseudo-family structure; stages of group development as they pertain to this population; and the group therapist's role and characteristics in the treatment situation.

It is the authors' contention that group therapy, as a technique, and Erikson's stages, as a concomitant theoretical framework, can be an used effectively in working with acting-out Hispanic adolescent males. The primary therapeutic factors mobilized from the group process derive from the similarity in cultural and ethnic background of the members and also the ability of this modality to provide a corrective family experience and appropriate stage mastery.

This paper will address the important influences that peer and familial relationships have on an adolescent's ego-identity development, according to Erikson's stages, primarily focusing on the stage of Identity versus Role Confusion. Also, the following will be briefly reviewed: the impact of family dynamics and gender roles, particularly in Hispanic families, on adolescent development; how group therapy can offer such adolescents a culturally-syntonic corrective family experience as well as the opportunity to learn and practice new behaviors; and the stages of group development.

Adolescent Ego Identity Development

In order to understand an adolescent's developmental struggles we will first briefly review Erikson's stages of psychosocial development. Since this framework is based the effects of interactive, relational experiences with others on psychosocial development, it allows for both intra-cultural (e.g., parents, relatives) and inter-cultural (possibly school, neighbors) experiences and definitions.

Adolescents traditionally struggle with defining and establishing an identity during the fifth psychosocial stage, labelled Identity versus Role Confusion. During this stage, the adolescent searches for "continuity and sameness . . . and must refight many battles of earlier years . . . must artificially appoint perfectly well-meaning people as adversaries . . . and are ready to install lasting idols and ideals as guardians of a final identity" (Erikson, 1963). The adolescents are struggling to find a comfortable self definition by means of experimentation, reflection and consensual validation.

It has been posited that the acting-out Hispanic adolescents may not have mastered the previous stages. For instance, many of these adolescents come from impoverished environments and from dysfunctional families where their basic needs may be unmet which directly impacts on their ability to master the first stage of Basic Trust vs. Basic Mistrust.

The second stage of Autonomy vs. Shame and Doubt may also be compromised when an adolescent comes from an extremely chaotic family where a lack of consistent structure in child rearing is evident. This may manifest in either overly punitive or overly permissive behaviors, for example during toilet training.

These adolescents, from dysfunctional and maladaptive families, generally have negative role models which impacts on the stage of Initiative vs. Guilt when a child learns and establishes appropriate social behaviors in preparation for school.

Adolescents from these families are generally not provided an environment that promotes academic growth or emphasizes school success. This negatively impacts the stage of Industry vs. Inferiority.

The adolescents lack of identity stage mastery coupled with gender identity formation and cultural differences result in an adolescent who is confused and angry. This can lead them to act in socially inappropriate ways.

The family group has been described dynamically, as influencing impulsive, acting-out behavior through the transactional processes of projection and identification occurring within the family. This unconscious process calls for one member to express the impulse on behalf of the entire group (Zinner & Shapiro, 1974). Minuchin (1974) framed this as the family "imprinting" its members with selfhood. Acting-out behavior, when seen as a defense against anxiety stimulated by the complexities of adolescent decision-making and exacerbated by cross-cultural conflict (Hardy-Fanta & Montana, 1982) can also be seen as a battle between parental frustrations, expectations and values as played out through the adolescent.

Hispanic Families' Influence on Identity Development

In order to attempt to study an ethnic group some baseline information is needed. Difficulties always arise in efforts to generalize because these generalizations do not always account for regional, generational, socioeconomic and idiosyncratic variations in lifestyles. That is, what is valid at the macrosocial level may require qualifications at the microsocial level. Also, cultural norms tend to relate to a public reality of expected, appropriate behaviors which may not necessarily coincide with the private realities of group members in day-to-day existence (Falicov, 1982).

The following are some characteristics that have been reported in the literature as consistent in low-income Hispanic families. These characteristics can be used to begin to understand how people from this subculture see the world, and how that may affect their functioning in groups. Of course these characteristics are not exclusive to the Hispanic, low income culture. Hispanics, as referred to in this paper, include adolescents born to families from Spanish-speaking countries, who now reside in large inner-cities.

Within the culture there is a deep sense of commitment, obligation and responsibility to family. The family guarantees protection and caretaking for life, as long as the person stays in the system (Garcia-Preto, 1982). Confidence, sense of security and identity are experienced through, and derived from, relationships with others in the family (Fitzpatrick, 1971). This idea of "family" may extend to gangs or other peer groups when the actual family is viewed by the adolescent as not meeting his needs. Again this idea of belonging, of "being a part of" can be fostered in the group through creation of an accepting, empathic and understanding environment. It is possible for co-therapists to be seen as extended family over time as the therapeutic alliance develops.

It is the therapists' responsibility to help members verbalize and clarify the implicit social structures, both cultural and personal, that are operating so they can be addressed in the group. It is also important that the therapists not inadvertently violate these structures. Respect can be demonstrated by the therapists through such micro-behaviors such as pronouncing the youth's name appropriately or by calling him by whatever appellation he prefers (possibly street nickname).

Gender Roles

The roles of men and women in low-income families have traditionally emphasized the authority of the male in that he is supposed to be able to make decisions without consultation and expects obedience from his wife and family. His major responsibility has been to protect and provide for the family. There is a high value placed on fearlessness and courage (LeVine & Padilla, 1980) that may be associated with sexual prowess and influence over women, reflected in romanticism and jealous guarding of women or in pre- and extra-marital relationships (Fitzpatrick, 1971). These characteristics are the basis of "machismo".

The role of the female has, traditionally, tended to be that of home-maker and child-rearer. Wives will overtly support the husband while assuming power behind the scene and remaining the family focal point through self-sacrificial mothering. This has been viewed as the female counterpart of "machismo", that is, "marianismo" (Stevens, 1973). Women are taught to repress or sublimate sexual drives and usually regard sex as an obligation (Garcia-Preto, 1982). The family role of mother and child-rearer is at times dichotomized with that of lover, creating a "madonna-whore" split: some women are for wives while others are for pleasure. Falicov (1982) described "el amor de madre" (a mother's love) as a greater force than wifely love. The existence of children validates and cements a marriage and makes romantic ties secondary to that of preservation of the marriage.

These values may manifest themselves in group through boasts of impulsive, aggressive or high-risk behaviors, as well as in members' discussion of relationships with girls. It is important for the co-therapists to recognize the impact of these values in relation to how the members respond to interventions from them. Exploration without value judgements can be helpful. Questions about the relationship between co-therapists may arise.

Group Therapy

Since many of the youths discussed in this paper come from chaotic and disorganized family backgrounds, the ability of group treatment to provide a pseudo-family experience in which to develop new role definitions and interaction patterns is crucial. Group therapy offers a corrective family experience and an opportunity to learn new behaviors (Bernstein, 1964). With preferably mixed gender therapists as symbolic parents, the adolescent can begin to demonstrate and address the culturally derived patterns and expectations derived from his family. Also, it allows for "refighting" of unresolved previous stages.

These roles and definitions are crucial to the understanding of the Hispanic adolescent's interaction style in a group. Much has been written about the various roles in groups (Luchins, 1967; Bach, 1954; Yalom, 1975), and the negotiation of those roles when they become "locked" (Bogdanoff & Elbaum, 1978). However, little has been written addressing the culture's impact on the definition and expression of these roles. This said lack of research contributes to therapist "role lock," because they are forced to rely on traditional psychotherapeutic techniques which may not adequately meet the needs of this population. The therapist must embark on experiential research which requires great trust in the adolescents, enough so as to allow the youth to develop a supportive therapeutic environment which is culturally syntonic. An ability to deal with ambiguity may be necessary if the therapist's own background is very different from that of the group members.

Stages of Group Process

The initial stage of the group process is likely to be characterized by pessimism, reflective of members' isolated suffering from past experiences (Hynes & Werbin, 1977). These feelings are compounded in the Hispanic adolescents due to their past contact with non-Hispanic authority figures, which solidified their feelings of being different and as having little access to power. The boys will express their hostility toward the establishment and its current representatives (the therapists) by recounting horror stories of misunderstandings, mishandling, unfairness and rejection by all symbols of authority. Concomitantly, they will express grandiosity and feelings of omnipotence that preclude any need for assistance or support. This serves two purposes: first, it represents an effort to impress the other members and establish the member's position in the group; second, it is a period of testing the limits of the therapists, to see if harsh, bitter reality they can withstand the wrath of the of the members' experiences. Such feelings appear to be expressed tentatively at first, undoubtedly due to the culturally defined style of relating to authority discussed earlier, in combination with negative memories of past encounters with authority figures. They will vent more readily if they see that the expression of the feelings is not suppressed by the therapists. These are also symbolic expressions of incidents demonstrating the level of resolution of previous stages, particularly Basic Trust vs. Basic Mistrust.

Technically, validation of the feelings of powerlessness and frustration is very helpful at this point. Also, the introduction of the idea that similar feelings must be being experienced toward the current co-therapists can be very facilitative. Anger and resentment at therapists is usually transferential in nature and should be handled as such. Ideally, the adolescents should be allowed to use whatever language feels most comfortable for them, be it Spanish, street slang or some other combination, so that spontaneity and honesty will not be lost (Delgado, 1983). Translation or explanation can be provided after the initial, spontaneous ventilation of feeling. Emotionally and psychologically, the message of acceptance and understanding by the therapists must be communicated to help create an atmosphere of safety.

The second stage of the group process involves the discovery that one's fellow members share similar experiences and feelings. Participants begin to examine the causes of their suffering and to realize they have individual needs (McKinley, 1987). Similarities and differences are explored as group members discuss their perceptions, and the roles they play in their life events. External influence such as family, peers and society are discussed in terms of internal feelings and motivations. Discussion of how familial and cultural influences are different from majority culture should be encouraged, as well as difficulties explored. This level of interaction is slow in developing in that the boys are not always prepared with a "feeling vocabulary" due to cultural and socioeconomic factors. Developing labels for feelings that are ego-syntonic for the individual, and also understood by the other group members, is an important part of the work of this stage. The co-therapists must be willing to ask for clarifications and definitions of slang or colloquial terms to help members communicate more clearly. Also, they must be willing and able to use the terms appropriately in dialoguing with members. This validates the adolescent's search process and demonstrates support from the adult caretaker representative (i.e., co-therapists).

Reinforcement of developing empathy and the sense of belonging is important, as is emphasizing an understanding of the ambivalence undoubtedly being felt by the members. This ambivalence hinges on the gender role and street culture emphasis on hiding negative, weak or "soft" emotions (e.g., fear, anxiety, ignorance). Letting others see these emotions can have the effect of suggesting weakness, and therefore can subject the person to embarrassment, ridicule and even actual physical harm.

The third stage of the group process entails the group has utilized in the past or attempting to incorporate the style of relating which has developed in the group: i.e., good fellowship, development of individuation and better understanding of self in relation to significant others (McKinley, 1987). A central task at this point is helping members deal with pressure from peers not to change. This task includes helping the adolescent to move between cultures more fluidly.

Group Therapist

Therapists need to have a solid understanding of Hispanic culture (Menikoff, 1979; Ruiz, 1979; Werbin & Hynes, 1975), including non-verbal communication and the impact of cultural value orientations on behavior (Delgado, 1983). Knowledge of age appropriate developmental issues in a cultural context is also very important.

The use of therapist self-disclosure in group treatment with Hispanics has been suggested (Delgado, 1981, 1983; Olarte & Masnik, 1985) but should be used carefully given the powerful transferential influence possessed by the therapists. Although disclosure may be useful after a meaningful and trusting therapeutic relationship is established, a careful analysis of the ramifications of the disclosure and inquiry into its dynamics is indicated.

The literature suggests that when treating Hispanic patients, the therapists should ideally be bilingual (Delgado, 1983; Menikoff, 1979; Ruiz, 1979; Tylim, 1982). However, the experiences of these authors suggests that knowledge, sensitivity, and acceptance of cultural differences, including linguistic differences, may suffice in developing a meaningful and trusting psychotherapeutic relationship. It ought to be noted that the use of language may also serve as a defense mechanism (e.g., splitting, distancing).

Conclusion

This paper has explored the impact of peer and family relationships on adolescent personality and identity development. It was suggested that the understanding of these influences, along with their cultural meanings and symbols, may help inner-city acting-out Hispanic adolescent boys. Group therapy can be a useful psychotherapeutic modality because it provides a pseudo-family structure in which new behaviors and interactions can be experienced and unresolved stages can be reworked. Research has revealed that Hispanics tend to have a deep sense of commitment, obligation and responsibility to the family. These characteristics can be fostered in the group therapy experience through the demonstration of empathy, acceptance and understanding. Group therapy offers a corrective family experience and promotes more adaptive ego functioning.

This paper reviewed five of Erikson's stages of psychosocial development along with the expected group stages in working with inner-city, acting-out, Hispanic adolescent boys. The initially difficult phases of establishing trust to the point of being able to contribute to structural changes in the adolescent's manner of relating were explored. It was emphasized that knowledge of the culture is very important, as is a willingness to learn each individual's perception of his culture. The acceptance of cultural differences fosters the development of a relationship of respect and trust which allows the adolescent an opportunity to explore more appropriate coping and relating styles which are ethno- and ego-syntonic.

References

Bach, G. (1954). *Intensive group psychotherapy*. New York: Ronald Press.

Bernstein, B. (1964). Social class, speech systems and psychotherapy. *British Journal of Sociology*, 55, 54-64.

Bogdanoff, M., & Elbaum, P. L. (1978). Role lock: Dealing with monopolizers, mistrusters, isolates, helpful Hannahs, and other assorted characters in group psychotherapy. *International Journal of Group Psychotherapy*, 28, 247-262.

Delgado, M. (1981). Hispanic cultural values: Implications for groups. *Small Group Behavior*, 12, 69-80.

Delgado, M. (1983). Hispanics and psychotherapeutic groups. *International Journal of Group Psychotherapy*, *33*, 507-520.

Erikson, E. H. (1963). *Childhood and society* (2nd ed.). New York: Norton.

Falicov, C. J. (1982). Mexican families. In M. McGoldrick, J. K. Pearce, & J. Giordano (Eds.), *Ethnicity and family therapy*. New York: Guilford.

Fitzpatrick, J. P. (1971). *Puerto Rican Americans: The meaning of migration to the mainland*. Englewood Cliffs, NJ: Prentice-Hall.

Garcia-Preto, N. (1982). Puerto Rican families. In M. McGoldrick, J. K. Pearce, & J. Giordano (Eds.), *Ethnicity and family therapy*. New York: Guilford.

Hardy-Fanta, C., & Montana, P. (1982). The Hispanic female adolescent: A group therapy model. *International Journal of Group Psychotherapy*, *32*, 351-366.

Hynes, K., & Werbin, J. (1977). Group psychotherapy for Spanish-speaking women. *Psychiatric Annals*, *7*, 52-63.

LeVine, E. S., & Padilla, A. M. (1980). *Crossing cultures in therapy: Pluralistic counseling for the Hispanic*. Monterey, CA: Brooks/Cole.

Luchins, A. (1967). *The human group*. New York: Harcourt Brace.

McKinley, V. (1987). Group therapy as a treatment modality of special value for Hispanic patients. *International Journal of Group Psychotherapy*, *37*, 255-268.

Menikoff, A. (1979). Long-term group psychotherapy of Puerto Rican women: Ethnicity as a clinical support. *Group*, *3*, 172-180.

Minuchin, S. (1974). *Families and family therapy*. Cambridge, MA: Harvard University Press.

Olarte, S. W., & Masnik, R. (1985). Benefits of long-term group therapy for disadvantaged Hispanic outpatients. *Hospital and Community Psychiatry*, *36*, 1093-1097.

Ruiz, E. (1975). Influence of bilingualism on communication in groups. *International Journal of Group Psychotherapy*, *25*, 391-395.

Stevens, E. (1973). Marianismo: The other face of machismo. In A. Pescatello (Ed.), *Female and male in Latin America*. Pittsburgh: University of Pittsburgh Press.

Tylim, I. (1982). Group psychotherapy with Hispanic patients: The psychodynamics of idealization. *International Journal of Group Psychotherapy*, *32*, 339-350.

Werbin, J., & Hynes, K. (1975). Transference and culture in a Latino therapy group. *International Journal of Group Psychotherapy*, *25*, 396-401.

Yalom, I.D. (1975). *The theory and practice of group psychotherapy*. New York: Basic Books.

Zinner, J., & Shapiro, R. (1974). The family group as a single psychic entity: Implications for acting out in adolescence. *International Review of Psycho-Analysis*, *1*, 179-186.

Trusting Ole' Wise Owls: Therapeutic Utilization of Cultural Strengths in African-American Families

Howard C. Stevenson
University of Pennsylvania Graduate School of Education

Gary Renard
Middletown Residential Treatment Center
Division of Child Mental Health
State of Delaware

The development of competent cross-cultural/racial strategies in psychotherapy requires some understanding of the underlying racial dynamics that can accompany therapeutic relationships with African-American families. More work needs to be done to isolate the variables or components which stand out as key toward the accurate understanding of the cultural behaviors of African-American families. This paper will discuss the therapeutic aspects of cultural strengths and emphasize how therapists can unwittingly block their expression. To date, very little clinical or research work has undertaken direct investigation or reporting of how cultural expressions are demonstrated in the complex interactional context of a therapy session. In this article, cultural strengths identified through therapy work with one family include rhythm as demonstrated through a call-and-response interpersonal communication style and orality as demonstrated through the use of metaphors. The family therapy process will be analyzed according to Sue and Zane's (1987) notions of credibility and giving.

Why should the world be otherwise? -- Paul Lawrence Dunbar

Cross-racial therapeutic situations raised many concerns during the 70's and 80's and a host of researchers and clinicians identified the need for psychotherapists and researchers to acknowledge the role of culture within the therapeutic process (Hunt, 1987; Sue, 1981 ; Sue & Zane, 1987). The development of competent cross-cultural strategies in psychotherapy requires some understanding of the underlying societal racial dynamics that can accompany therapeutic relationships with African-American individuals and families. Sensitivity to the unique cultural values and behavioral expressions of all minorities has been advocated strongly by many (Boyd-Franklin, 1989; Ridley, 1984).

One of the most difficult facets of psychotherapy for any therapist is beginning and getting the relationship to a place of comfortability (Hunt, 1987). In their statement on the reformulation of the role of culture and cultural techniques in psychotherapy, Sue and Zane (1987) have identified two underlying processes that are crucial in developing trustworthy cross-cultural therapeutic relationships. Those processes are credibility and giving. Underutilization of therapeutic services may be related to the therapist not having ascribed credibility, or some publicly accepted status as a qualified helper. They suggest that premature termination of clients may be a result of a lack of achieved credibility, namely whether or not the client/family perceives the therapist to be competent based on their interactions with him or her during therapy. Giving refers to the process whereby clients/families receive something as a result of their participation in therapy. Examples of gifts include the reduction of anxiety and the acknowledgement of the worth of a client's worldview. In this particular paper, the case of one cross-cultural session will be discussed. The therapist's movement from a stance of low achieved credibility to one of high achieved credibility is tracked.

A Legacy of Distrust

The historical portrayal of African Americans by scientific psychology has been less than humane (Guthrie, 1976). At best, students of psychology are forced to reshape their understanding of the international contributions of the discipline of psychology when they learn of its history of scientific racist conjecture (Gould, 1981). The establishment of a psychological system of superiority and hierarchy with respect to intelligence, physical ability, and sexual prowess, to name but a few categories, was not unknown to the larger African American community. Many African American authors have identified this as a system of "tricknology" (White, 1980). In fact, many of the survival skills developed within many African American communities were due to a general suspicion of the motives and actions of white persons in roles of authority. Often, African Americans would cloak their true intentions in socially acceptable "politeness." This coping behavior is ultimately paradoxical in that many perceived the behavior as trustworthy. An example includes the role of the trickster that was held in esteem in African American and African folktales. This role symbolized a subtle form of sophisticated rebellion (Baker, 1972).

"Wearing the Mask"

Paul Lawrence Dunbar's poem, "We Wear The Mask" tells so eloquently of how this distrust of existing social dynamics was molded into a particular survival skill. While there are many other reactions to oppressive conditions, the question of whether the dynamics of hostile race relations still exist is still a reasonable one. It is even more reasonable to investigate whether these relations are played out within the therapeutic context. Moreover, how do various African American clients handle the implied hierarchical relationship of therapist and client when the therapist is white?

This is a broader issue than the question of whether clients prefer therapists of a particular race because in many counseling situations, choice of therapist is simply not possible. It is proposed that the nature of hostile race relations in this country can contribute to the distrust African Americans feel because of the underlying pejorative hierarchical implications of those relations. These social relations define the script for those relationships. Moreover, to succumb, give in, yield, or cooperate without some expression of rebellion may represent for many African Americans a re-enactment of slave conditions — a situation wholly unacceptable. These race-relation scripts differ across various families but must be acknowledged where identified. It must also be acknowledged that any attempt to disregard the strengths (cultural or otherwise) which Black families bring into therapy will result in disaster, or more specifically, a diminution of achieved credibility. The emergence of a Black or Afro-American perspective in counseling has been founded upon a dissatisfaction with this type of disrespect (Jackson, 1980a, 1980b).

Gift-giving and credibility, thus, become of supreme importance to cross-cultural relationships, especially in the early stages. Where utilized, these processes can begin to rewrite the race relations scripts which may muddle cross-cultural therapeutic situations.

As such, the role of ethnic sensitivity training is necessary but not sufficient (Sue & Zane, 1987). What to do and when to do it becomes blurred and ineffective if one is rigidly following a "technique by ethnicity" matrix. Gift-giving as we have interpreted it, represents more than complimentary dialogue. It has to be accurate and fit within the family's self-perception in order for it to be experienced fully as a gift. Additionally, it should advance the therapy process, if no more advancement than the family understand the therapist's motives during the therapy process.

One begins to rewrite the script of racial hostility through the gift of acknowledging the family's worldview. The therapist who takes total authority for the direction of the therapy process may stimulate too many emotions and roadblocks of distrust, which, arguably, are historical in nature. By historical, it is meant that past events and associations with Caucasian persons in authority will undoubtedly stimulate a cautious response. This "legacy of mistrust" takes on many forms (Boyd-Franklin, 1989) and is related to what Grier and Cobbs (1968) identified as "healthy cultural paranoia."

It is important to assess whether hostility is defined as destructive or as potentially functional. Caution and resistance may represent a coping mechanism. For what reason would an individual disclose sensitive information if he or she felt that it served no protective or self-enhancing purpose? "Why should the world be otherwise in counting all our tears and Sighs?" Ridley (1984) makes this point also.

In light of this legacy, the goals and situational context of traditional psychotherapy appear to be especially incongruous with the disclosing tendencies of many black clients. By disclosing, black clients again render themselves vulnerable to racism and oppression. Yet, the process of disclosure is facilitative of the client's therapeutic movement. By not disclosing, black clients protect their self-esteem (p. 1237).

The gift of acknowledging a family's parental wisdom is one direction that seems appropriate to take in resistant cross-cultural relationships in which the therapist is white, the family/client is African American, and subtle underlying race dynamics are present. Seemingly, every therapist will say, "I already do that" or "What's the big deal?" It is proposed, however, that not very few therapists are trained to conceptualize difficulties or progress in cross-racial therapeutic arrangements within a racial socialization perspective. By acknowledging and believing that the family has its own merited insight that can be mobilized as therapeutic rather than antagonistic to the process of therapy, one can gain important achieved credibility.

Utilization of Cultural Strengths

The notion of empowerment is applicable here. From a family systems viewpoint, empowerment involves the process a family network uses to right itself after it has been therapeutically imbalanced in a direction which matches the families goals and self-perceptions. Societally, empowerment may represent whole communities rising up against the oppression of major institutions. In psychotherapy, however, the definition given by Boyd-Franklin (1989) seems to suffice for our purposes. Empowerment is "the process whereby the therapist restructures the family to facilitate the appropriate designation and use of power within the family system and to mobilize the family's ability to successfully interact with external systems." Stated differently, it is the therapist's effective giving of gifts which allow the family to move beyond its present state of ineffectiveness. Ineffectiveness, ultimately, has to be defined by the family.

The cultural aspects of African American children and families have been articulated in an holistic fashion (Boykin, 1983). What exactly is cultural about how Black parents interact with each other or with their children? This question must be asked prior to determining how therapists will behave in an ethnically sensitive manner toward Black families. It has been suggested that African American parents teach their children in modes rather than in rules and as such there are no prescribed steps that one can point to (Young, 1974). In her discussion of the cultural elements of African American mothers' behavior toward their children, Virginia Young articulates the functions of goal persistence, cue perception, and interpersonal focus. She states,

> The functionality of the behavior appears clear on many levels. It is a survival strategy of people who deal daily with institutional and personal discrimination. It is also a means of dealing with the bicultural situation of the group, which requires people to learn to live in two worlds, to coordinate the elements of the two traditions borne by the parents, to learn the conventions of two cultures, and to manage the contradictions between them. Techniques of sizing up situations and persons have obvious value both when confronted with discriminatory action and when two very different sets of messages are constantly being received and require response (p. 411).

She goes further to identify "interactive music and preaching styles" which are part of Black culture and which are socialized through a parental contest style. The support for salient cultural behaviors comes from Young's anthropological work.

There has been a resurgence in the social sciences for the support of Afrocentricity as a major theoretical framework to explain the thoughts and behaviors of African-Americans (Asante, 1987; Nobles, 1980). More work needs to be done to isolate the variables or components which stand out as central to the accurate understanding of the behaviors of African-American families. Global strengths have been identified (Hill, 1972). The search for a more specific articulation of strengths has led various African-American authors to identify a variety of unique cultural attributes (Boykin, 1983). The following expressions represent more specific examples of Black family strengths: an opportunity for expression of individual family members' unique behavioral style; some presence of spirituality or belief in God; evidence of belongingness of all family members (i.e. communalism); some evidence of orality or the stylistic communication of values (i.e., rap), or the rhythmic call-and-response style of interpersonal communication, to name a few. Other parental-child interactions which have been briefly touched upon and which are relevant for this discussion include open discussion of interpersonal and racial struggles faced by family members; a healthy cultural paranoia, or awareness of societal racism; a parental empathy towards children's similar life/race struggles; and metaphorical parenting, or parenting through story-telling and proverbs.

The tracking of gift-giving is a strategy proposed by the authors as a means of concretizing the impact (successful or not) of the gift-giving process on the family therapy interactions. This simply involves developing family therapy strategies designed within a context of finding something positive and nurturing in the parents' interactions with their children and/or the world around them. Following these interactions, one can determine to what degree the process of gift-giving contributed to or detracted from therapeutic progress. The following case illustrates the gift-giving process which worked successfully.

Clinical Case Example

The following transcripts are from a session by a therapist who has seen this particular African American family for four sessions over four months. The therapist is Caucasian and has had successful contacts with other African American families. This particular family has been very resistant when he requested consultation from the senior author, who is African American. Live supervision via camera was determined to be the best method for consultation since inclusion of the consultant in the therapy session might prove to undermine the therapist's ascribed status with the family.

The daughter in the family will be referred to as B in order to protect her identity. Family dynamics included this being a blended family, with a divorce of B.'s natural parents, and subsequent remarriage happening recently. B. had reasons not to trust the stepfather and was rebellious and angry towards her mother and stepfather. She felt the whole process led to her natural father being taken away from her. Her history of experiences over the past two to three years included sexual victimization by a neighbor, suicidal behavior, several psychiatric hospitalizations, severe fighting in school, and several aggressive altercations with staff members within the various psychiatric residential institutions she had been placed at. She has had situations in which she accused staff of being abusive towards her. Attempts to connect her with her natural father did not work out as he felt he could not handle her problems by himself.

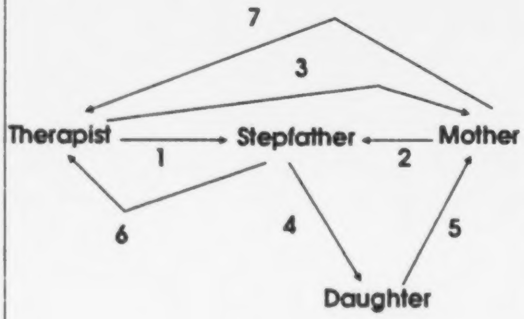
One systemic hypothesis proposed regarding this family's difficulties was that there was confusion in the parental subsystem such that B. was allowed to manipulate their authority. It was also hypothesized that there were intruding issues lingering from the previous marriage and so there was a possibility that these issues encouraged B.'s acting out. In previous family sessions, B acted very defiantly and did not want to be in the same room with the stepfather and had a history of leaving sessions in the middle of them to disrupt the process.

Just prior to this session, B. was involved with another altercation with a white female staff member which resulted in an alleged shoving match between the staff member and B. The session begins with the therapist's attempt to get the parents (stepfather and mother) to talk with B. about the incident. He is unsuccessful as the family thwarts several attempts to initiate dialogue about this potentially volatile incident. A small plea was made by the stepfather for the offending staff member not to lose her job. Following a conference with the supervisor, the therapist returns to the session and gives the first gift to the stepfather by acknowledging how balanced a view he has about this difficult situation and a second gift to the mother for her wisdom in the selection of this man as her spouse.

The following dialogue ensued.

Th: I was just curious, in thinking about D. that you have concerns about her too. — that you felt, it almost sounded like, badly for her.

GIFT-GIVING DIAGRAM



1. Therapist acknowledges stepfather's wisdom.
2. Therapist congratulates Mother's wisdom in her choice of spouse.
3. Mother agrees with therapist and affirms her husband's wisdom.
4. Stepfather tells daughter clearly that he loves her.
5. Daughter acknowledges Mother's wisdom in choice of husband.
6. Stepfather invites therapist into a special rhythmic diaglogue.
7. Mother gives therapist a compliment on his handling of session.

Figure 1

SFa: Yes. Like I said. Whether things or not, everybody needs to work. You even need more than one job to work now. I don't know, she might have a family that she has to support, a husband might not be working like me. She might need the money. See I don't know. Cause I feel sorry for people who lose their job. It ain't no fun and games out there like it used to be.

Th: That's a really caring attitude to have. It's not a lot of people that I can think of who would be in a situation like this where their stepdaughter is involved in this kind of incident and would show just as much concern for the staff member. I think its a really nice quality. I really do.

SFa: You see, it really don't matter what color you is, its hard times out there. If you lose your job, you don't know if you can get the same job or not. You might get a low paying job. If you get in that high bracket and get used to making money, you fall down, then say you hit rock bottom. You see what I'm saying-

Th: It's not fun being out of work.

Through this interaction, the affect of both parents improved and the mother is included into the dialogue. It is also significant that the stepfather has disclosed that he is unemployed. He then shares his struggle with living in a harsh society. Of utmost importance in this interaction, however, is the stepfather's unprompted identification of "color" as an issue. The stepfather's concern (and probably the family's) about racial hostilities, although submerged, is very real. He held apprehension about the racial climate surrounding this incident but his focus remained on the plight of being unemployed.

Following this exploration of the stepfather's worldview, we begin to see how the initial gift becomes catalytic. The second gift is seen on the heels of a risky move on the part of the therapist when he suggests the mother is fortunate to have chosen her spouse who happens to be so balanced. Interestingly, the mother accepts this gift with no reservation and no hint that she is diminished by the acknowledgment of her husband's strengths. It is as if his strengths are not solely his but represent the family's strengths. The third gift is to the stepfather from the mother as she notes her husband's unique sensitivities.

SFa: You see, I feel for everybody. Don't matter what color, what race you is. I feel for her [pointing to his stepdaughter] and I feel for her [referring to the staff member]. All I say, is that there are 2 sides to every coin. You see what I'm saying?

Th: I think that even that last statement that you just made, "There are 2 sides to every coin". We see a lot of different families and its very unique for you to come in and say "I want to look at both sides" [Stepfather puts newspaper away] . . . I think that's a really special quality. I mean you're pretty lucky there T. [talking to mother] to have somebody so evenhanded with this. You really are. I think that J. is very special in that respect. He has the ability to really balance things out.

Mo: A lot of times B. will tell us that something has happened. He (referring to J.) says there are "two sides to every story". . . . . After dealing with B, — she's a really special child, you have to really weigh both sides . . . You got to learn how to weigh the scales, whether its even or uneven. We learned to do that.

One might be fooled into believing the father's sense of balance is expressed as the expense of the daughter's emotional well-being. The fourth gift goes to the stepdaughter via the stepfather. This gift is designed to really communicate to B. that she is cared for and that the revealing of the truth is tantamount to protecting a daughter's image. "Metaphorical parenting," as we have called it, is the parental use of metaphors, proverbs, or story-telling to teach children a lesson or cultural value. It has been identified as a key technique in African education (Boateng, 1990). Here, its use identifies the stepfather as a teacher above all of the other roles that he may be expected to play.

SFa: Now I don't want her to get me wrong. I still love you. Do you understand me? (Speaking to B.) I still care for you. But I'm not on your side or her side. Like I told you, one way or the other.. I don't care what the Pope said, somebody going to show what's going on. I'm going to be right in the middle and somebody going to show me what's going on. I always say, don't you never be on the losing end. . . . If you're right you're right, if you're wrong, you're wrong. It's going to come out. . . and I'm not on your side or their side. . . I'm telling you like it is. Me and your mama going to be sittin' right here, all of us sittin right in the middle. It ain't going in one ear and out the other. Everybody sittin' and waitin'. We just like an ole' owl sittin on top of a tree. We going to be lookin' down and see what be wrong. Its funny, but everybody notice an owl. . . You know why he sit up on top of that tree? He look all the way round see what's going on. Like I say, we sittin on top of tree — looking. Wherever it fall, that's who is going to be wrong.

SFa: Its funny though ain't it?

B: Uh-huh.

SFa: Sounds stupid too, don't it?

B: Uh-Uh (no).

(Stepfather is gleeful at the connection he has made and the extension of his metaphor's outreach.)

B: You know what, when you see those owls, you know their eyeballs don't move?

Mo: Uh-huh.

SFa: That neck goes all the way round and at all the same time he still looking down at that water. When he see that fish he hops off and go get it and go back up. (Mother laughs).

B: **Mom, you know what, you got a [lovely] husband.** (stated with slight sarcasm).

The use of the Owl metaphor is brilliant and reflects a variety of subtle messages. The messages are directed toward the therapist as well as towards the stepdaughter. To the therapist, the owl metaphor suggests that these parents have a unique wisdom that is truthful and must not be disregarded. Secondly, to the daughter, the owl image communicates their insistence on her being truthful and their being fair. That is, as parents they will make deliberate and careful judgments regarding their daughter and they will balance their love and caring with guidance. Thirdly, the metaphor is all-encompassing in that it invites the stepdaughter to participate. Finally, the stepfather is defining the family's self-perception through the metaphor. As a result, the daughter gives the fifth gift to both parents (through the mother) by acknowledging (albeit mildly sarcastic) her mother's choice of spouse.

Following this dialogue, the therapist conferenced with the supervisor for the second time. The recommendation was to continue the family's flow and to probe for hierarchical arrangements within the family through the metaphor, by suggesting that the family could be called the "Owl family". The systemic question raised here was, "Who is in charge in this family?" "Could there be some confusion between father and stepfather's role?"

Th: This is beautiful. And I guess it struck me, you guys ought to be called the owl family. Yeah that ought to be your name. (The family laughs).

B: **We were just talking about the owls.**

Th: No I'm serious about that. . . I'm wondering are you like the big owl in the family?

SFa: No. Ain't no big owls.

Th: Its not like your the big wise owl? You mean everybody is fair?

SFa: Might as well be fair.

After several attempts to uncover hidden strife, it becomes clear that the family rejects the notion that there is one leader and in fact strongly practices an egalitarian parenting style. They have also worked out a way between the three of them to work on the various parent-child conflicts. It must be noted that throughout this session, the stepdaughter has not gone into her usual disruptive behavior patterns and it can be assumed that she is enjoying this family definition process despite the fact that she will not directly admit it; instead of sabotaging overtly, she will attempt to submerge the process subtly while simultaneously basking in the enjoyment of the family cohesiveness.

Eventually, the therapist becomes more comfortable with the style of the family's self-expression. The sixth major gift takes place when the stepfather allows the therapist to participate in a call and response metaphorical dialogue. This dialogue, incidentally, gives credence to the necessity for family therapy and focuses the session towards the treatment goal of the eventual reunification of the family.

SFa: I watch that more than she does. I like to see how all the animals it don't matter what species they are, they—

B: **—do different things.**

SFa: Yeah, do different things, they still stay as a family. Like I told her, its like a wheel. When you get a spoke out of wheel it goes bumpy. But when you get the whole family together it rides real smooth. That's why I want her to come on home, so it'll ride smooth.

Th: So part of making that wheel ride real smooth is to get B. back home?

SFa & B: Uh-huh (Mother laughs).

Th: It's kind of bumpy right now without her, huh?

SFa & B: Uh-huh (Mother laughs).

SFa:Yes it is.

Th: That sounds like another owl statement, like a really wise observation on your part. That the wheel rides real bumpy right now and in order to get it to ride smooth, really balanced out again, B. needs to be back home.

SFa: Alright, now let me ask you a question?

Th: Uh-huh.

SFa: Now if you be riding a car.

Th: Uh-huh.

SFa: And you have a flat tire, how does that car ride?

Th: Real bumpy. (Mother laughs).

SFa: And what happens when you put a good tire on there?

Th: It rides real smooth.

SFa: All right then.

Here, the call and response style of oral communication in Black communities is evident in the stepfather's invitation to the therapist to be the student instead of the teacher. This style reflects the power of the spoken word, a characteristic also identified as a unique African American cultural attribute (Boykin, 1982; White, 1980).

Later in the session, the stepfather continues to use metaphors to make the point to the stepdaughter that her participation in the process of the residential program is a crucial step towards her eventual return home. The initial acknowledgment (i.e., the first gift) has led to the parents' accreditation of the wisdom of the center and the therapist. Without this endorsement, the therapist's credibility will diminish.

SFa: Can I ask you a question?

B: Yes.

SFa: You going to school right?

B: Yes.

SFa: And the teacher asks you to look up a word.

B: Yes.

SFa: And you don't know the meaning of that word, right, what do you do?

B: You look it up.

SFa: Alright then. See, what they trying to find out about you, they trying to look up what causes the problem. You know like you add, subtract, multiply . . . You got to find out how to solve the problem and get the right answer so they know what to work with.

Mo: So that then you can come back home.

B: But I don't get treatment here.

SFa: Its' like cooking a cake. When you cooking a cake you got to put all the ingredients. You don't just throw the water in there and put it in the stove, do you?

B: No.

SFa: How do you cook the cake?

B: You got to put the oil in there, you got to put the water and the butter and the eggs.

SFa: All the ingredients to make that cake, right?

B: Uh-huh.

SFa: That's why you're here, so that you can tell them your problems. They can put that in there and they can make that problem rise, then they'll know how to deal with it.

Mo: Then they'll know how to cut the cake.

SFa: . . . Then they'll say here's your slice, here's your slice . . .

B: But I don't trust nobody here to talk to them.

Mo: You don't trust us.

B: I don't trust them.

SFa: B., you got to trust somebody.

This is the crux of the family's troubles with its members as well as with the therapist. Trust. The stepdaughter is now part of the session and becoming part of the family.

As a testament to the underlying racial sentiments in cross-cultural relationships where the therapist is white and middle class and the family is African American and lower class, the stepdaughter picks up on the parents' unspoken concerns and attempts to sidetrack the family away from this nice flow. The therapist has now stepped out of the room for the final time and the following dialogue takes place between the family members.

B: That's why I say. How do they expect me to listen to them when I don't even listen to my own parents. Not trying to be prejudiced or nothing but I don't trust white people.

SFa: Well you don't trust no Black people either.

B: Out of all these people, the only people I talk to is Black people. I'm serious.

SFa: Well tell them then.

Mo: Did they talk with you trying to help you out with your problems?

B: No see it just makes me mad about white people on account of what happened a long time ago with Dr. Martin Luther King.

Mo: Now that is something you've got to deal with.

SFa: We can't help you on that.

Mo: I can't help you, tell you who to like and who not to like. Like the KKK, they don't like us, see that's a racial thing. I don't get into racial things. I know they're there. I know there's some people that don't like me. I just avoid them. I be friendly, I don't hate nobody. I know slavery, some of my family was in slavery. I got older people. . . I may have something with that white, green person, but I leave it.

B: I can't leave it.

Mo: Not leave it. I'm saying I don't worry too much-

B: That's escaping your problems.

Mo: Not really.

This family does not give up easily. B. is expressing some underlying conflicts the parents themselves seem to have but she seems to mention it in order to keep the family off balance. The parents don't go for the ploy.

In a very circular fashion, the stepfather reiterates his initial statements. The stepdaughter remains engaged with the process and a new relationship between them begins. The final metaphor is intended to instruct the stepdaughter in her dealings with persons who may abuse their authority. The stepfather briefly discloses the importance of religious influence in his life and in the life of the family. The message also suggests that the responsibility for truthful and trustful interpersonal interactions belongs with her.

SFa: You've got to keep a level head. If staff make you do things go ahead and do it. That's what they're here for. But one day you will be able to walk out that door. And you'll tell em "Bye". Some folks say "You'll be back" and you can make them out a liar.

B: Uh-huh.

SFa: Its not easy. . . You got somebody to knock you in your head — make you lose your . . . Sure. and when you get up at the top, there's always somebody say (punches his fist) and knock you back down again. But make sure you on the right side. Like I say it going to come out. How the Bible say, they cover my head, your feet gonna show. You cover your feet, your head gonna show (B. repeats along with the stepfather) , but something gonna show.

To top this session off, the seventh and final gift is given by the mother to the therapist as the family is leaving the session. She walks by the therapist, taps him on the shoulder and says, "Not bad, not bad," then walks out. This statement crystallizes the therapist's increased achieved credibility. Future sessions were lively and productive. The stepdaughter was discharged home within four months of the session. They continue to exist as a family with life struggles that challenge them daily. For two years since following discharge, however, the family continued to contact the therapist to update him on their progress.

Discussion

Societal racial dynamics and conflicts are no less prevalent in cross-racial therapeutic arrangements. This article identified key areas related to cross-racial therapy situation when the therapist is white and the clients are African American. The two key processes of giving and credibility identified by Sue and Zane (1987) were given primary importance as guiding actions which can lead to effective cross-racial relationships. Other areas which therapists and supervisors should be aware of include viewing distrust of persons in authority roles as adaptive and survivalistic, acknowledging the family's worldview as valid, and acceptance of unique cultural expressions as strengths which can enhance the effectiveness of therapy if utilized. Cultural strengths identified through one family's struggle with therapy include open discussion of racial and life struggles, metaphorical parenting, a call-and-response interpersonal communication style, and some sense of the influence of spirituality or belief in God.

Eventually, it is hoped that societal struggles with racism can be eradicated but until then, we must not turn our eyes away from its insidious impact within psychotherapy. Clinicians and researchers who can engage their work by asking questions of "What's right about the behaviors, values, and cultural expressions of African Americans?" rather than "What's wrong?" will undoubtedly benefit from this proactive search. A thoughtful investigation for and appreciation of strengths within the African American community is a never ending endeavor. Until this endeavor makes significant progress into other institutional and interpersonal relationships in our society, the wearing of masks to hide the true intentions of our actions may very well remain a coping strategy.

References

Asante, M. (1987). *The Afrocentric idea.* Philadelphia: Temple University Press.

Baker, H. A. (1972). *Long black song: Essays in Black American literature and culture.* Charlottesville, VA: University of Virginia Press.

Boateng, F. (1990). African traditional education: A tool for intergenerational communication. In M. Asante & K. Asante (Eds.), *African culture: The rhythms of unity*, pp. 109-122. Trenton, NJ: African World Press.

Boyd-Franklin, N. (1989). *Family therapy with Black families: A multi-systemic approach.* Guilford Press: New York.

Boykin, A. W. (1983). The academic performance of Afro-American children. In J. Spence (ed.) *Achievement and achievement motives.* San Francisco: Freeman.

Dunbar, P. L. (1968). We wear the mask. In A. Chapman (Ed.). *Black voices: An anthology of Afro-American literature.*

Grier, W., & Cobbs, P. (1968). *Black rage.* New York: Bantam Books.

Guthrie, R. (1976). *Even the rat was white: A historical view of psychology.* New York: Harper & Row.

Gould, S. (1981). *The mismeasure of man.* New York: W. W. Norton & Company.

Hill, R. (1972). *The strengths of Black families.* New York: Emerson Hall.

Hunt, P. (1987). Black clients: Implications for supervision of trainees. *Psychotherapy, 24*, 114-119.

Jackson, G. G. (1980a). The emergence of a Black perspective in counseling. In R. Jones, *Black psychology.* New York: Harper & Row, pp. 294-313.

Jackson, G. G. (1980b). The African genesis of the Black perspective in helping. In R. Jones, *Black psychology.* New York: Harper & Row, pp. 314-331.

Nobles, W. W. (1980). African philosophy: Foundations for Black psychology. In R. Jones (ed.), *Black psychology.* New York: Harper & Row.

Ridley, C. R. (1984). Clinical treatment of the nondisclosing Black client: A therapeutic paradox. *American Psychologist, 39*, 1234-1244.

Sue, S. (1981). *Counseling the culturally different: Theory and practice.* New York: Wiley.

Sue, S., & Zane, N. (1987). The role of culture and cultural techniques in psychotherapy: A critique and reformulation. *American Psychologist, 42*(1), pp. 37-45.

White, J. L. (1980). Toward a Black psychology. In R. Jones, *Black psychology.* New York: Harper & Row.

Young, V. H. (1974). A Black American socialization pattern. *American Ethnologist, 1*, 405-413.

Counseling Immigrant Children in the United States Public Schools

Giselle Esquivel, Mary Kopala, and Lucille Baptiste
Fordham University — Lincoln Center Psychological & Educational Services

There has been a significant increase in the number of immigrant students in the United States' schools. It has been estimated that the total number of immigrant school-age children falls between 2.1 and 2.7 million (Haney, 1987). Immigrant children represent a significant part of the school population that is at-risk for mental health problems as a result of stress-related factors. The potential sources of stress experienced by these children have been reviewed (Aronowitz, 1984) and discussed within the context of a preventive cross-cultural counseling approach (Esquivel & Keitel, 1990).

This presentation will focus specifically on (a) the process of migration and acculturation, (b) the stress factors that affect children as they progress through each of the stages in the process, and (c) appropriate interventions for addressing adjustment difficulties related to acculturative stress.

Acculturation

The transition of immigrants from the environment of the native country, with its social networks, familiar institutions, and customs, to a foreign country with unfamiliar ways and confusing networks requires significant adjustment and adaptation (Taft, 1979); but adaptation and adjustment can only occur through the process of acculturation.

Definition

The definition of acculturation has been relatively constant throughout the literature. According to Gordon (1964), acculturation refers to changes in peoples' behaviors, social and work activities, thinking patterns, values, and self-identification made by members of one culture as a result of contact with another culture. More specifically, Mena, Padilla, and Maldonado (1987) perceive acculturation as an adaptive process of cultural adjustment which takes the immigrants through several phases in order to maintain and improve their life conditions in a manner that is congruous with the new environment. Berry, Kim, Power, Young, and Bujaki (1989) posit that acculturation occurs only through first-hand contact over an extended period of time, and Mirsky and Kaushinksy (1989) propose that the process takes about three to four years.

Stages/Phase

Although the stages of acculturation for early European immigrants have been well defined, this is not the case for present day immigrants. Nevertheless, there is consistency in the acculturation process. For every immigrant, acculturation begins with migration and proceeds to some alternate mode or model of integration.

Acculturation and Children

Currently, there is minimal research on the acculturation process of children (Aronowitz, 1984), although there is a great deal of material on the stressors they experience during the process of adjustment and adaptation. Oberg (cited in Pedersen, Draguns, Lonner, & Trimble, 1981) proposed a model of adult acculturation which he termed "Cultural Shock." This model can be adapted to suit the acculturation process experienced by immigrant children. Oberg defined culture shock "as the anxiety that results from the loss of one's sense of when to do what and how." The model consists of four phases (a) fascination, (b) hostility, (c) adjustment, and (d) biculturalism. At every phase, the immigrant experiences a different set of emotions and stressors.

Phase 1. Fascination. Oberg (cited in Pederson, et al., 1981) considered fascination as the first period of acculturation. During the first weeks following migration, immigrant children are in a state of overexcitement and experience euphoria resulting from the new culture. Everything is novel, different, and curious, often incompatible with their previous lives and experiences, and there is much to absorb. For those coming from war-torn countries, there may be relief. For those coming from underdeveloped countries everything may seem wonderful beyond their wildest imaginations. At this stage, most immigrants feel like tourists. The realization that they are here to stay has not yet dawned on them; they are often in a state of denial. Mirsky and Kaushinksy (1989) describing the process of absorption of immigrant students in Israel, report similar experiences.

Phase 2. Hostility. Oberg (cited in Pederson, et al., 1981) perceived hostility as the second phase in the process. Encounters with everyday life in the United States of America force young immigrants to realize that the environment is totally unfamiliar, unpredictable, and often uncontrollable, and that they are here to stay. For example, getting up early to go to school, dealing with busy traffic, language and communication problems — these problems may seem insurmountable. Accustomed behaviors are now considered inappropriate and previous interpretations of situations are now inaccurate. At this point they may begin to experience real loss, and appear to be grieving for what they left in their home countries — namely, friends, members of extended families, language, culture, familiar rituals. These experiences may evoke immense anger and hostility in the newcomers. According to Miraky and Kaushinksy (1989, there is noticeable hostility aimed at the country of origin as well as at the host country. The ambivalence forces immigrant students to seek each other's company. Often spontaneous homogeneous groups with a common country of origin or language develop. Older students may seek to reestablish a relationship with their country of origin by corresponding with individuals back home or reading books and newspapers from home.

Phase 3. Adjustment. In this phase, the immigrant children begin to make some form of adaptation or adjustment. There is a new response as they start to evaluate the cultural values of their countries of origin and the values of the host country, and really try to gain an understanding of the new culture. In so doing, they try to gain some form of psychological balance, and a sense of well being. There begins a radical change in the direction of integration. Mirsky and Kaushinksy (1989) observe a new sense of realization among older immigrant students as they begin to differentiate between people. They begin to appreciate that some teachers are respected and others are not, and that some host students are accepted and others are not. Gradually, less time is spent with homogeneous groups as the immigrants make new friends and begin to participate in the social and cultural activities of the school.

Phase 4. Biculturalism. At this stage, the young immigrant starts to accept the host country as offering both negative and positive alternatives. Burnam, Hough, Telles, Karno, and Escober (1987) point out that what really occurs at this phase is a form of psychosocial adaptation which can involve a fundamental change that includes relearning of symbols, readjusting to a new system of values, and relinquishing some old customs, beliefs, and behaviors. Acculturation is reflected in many different aspects of behavior and values, including language used in different contexts, work and leisure time activities, preferences in food and music, ways of celebrating special events, and relationships with friends and family. The multifaceted nature of the acculturation process suggests that it is a multidimensional concept. Oberg (1958) suggested that acculturation is completed if, upon return to the country of origin, one experiences reverse cultural shock in readjustment.

Mitigating Variables

Every student does not experience the process of acculturation at the same rate or with the same intensity. Certain predisposing variables such as age, language proficiency, education, and previous contact (Chiswick, 1977), family structure, and cultural similarity (Hirschman, 1982) will influence acculturation. Research has shown that children over the age of 14 and/or who have had prolonged separation from their parents seem to have more problems in the process of acculturation (Bagley, 1972). Children who live in predominantly ethnically segregated areas, and those whose parents are less well educated seem to encounter more difficulties. The reasons which prompted individuals to immigrate will also influence the rate of acculturation (Wong-Reiger and Quintana, 1987). Immigrant children whose parents are pulled for educational or economic reasons acculturate more easily than those pushed by political upheavals, who resist breaking contact with the homeland.

According to Coelho and Stein (1980), acculturation is not an "all-or-none" phenomenon, but rather involves three types of social-psychological functioning: cognitions, behaviors, and self-identification. Cognitively, the immigrant child must understand new social norms and customs. Behaviorally, acculturation requires learning appropriate verbal and nonverbal skills. Finally, changes in self-identification are vital to incorporate new social roles and values that provide a sense of belonging. According to Coelho and Stein (1980), it is important to remember that in the process of acculturation, children need to maintain consistency among these three types of social-psychological functioning.

As the research states, at the end of three to four years, an immigrant would have adapted to some mode of integration. For example, some may adapt a Bicultural Integration model (Padilla, 1980) whereby the individual identifies with both old and new cultures, others may maintain separate spheres of interaction.

For immigrant children to be properly served, it is essential that those individuals involved have a clear understanding of the acculturation process. A clear and realistic understanding of the acculturation process will heighten awareness of the stressors the children encounter.

Stress

Stress has been conceptualized as an altered state, produced by adverse psychological, social, cultural and/or physical factors, which may result in physical and/or mental disorders in vulnerable individuals. The study of stress was initiated by Cannon (1928) who detailed the direct relationship between intense negative emotional states and subsequent changes in bodily processes. Adolf Meyer (cited in Rogler, Malgady, Constantino, & Blumenthal, 1987) extended Cannon's work by delineating the role that life events play in the development of physical and mental disorders. Hans Selye (1956), enhanced the understanding of physiological adaptation to stress. Subsequent studies on stress emphasized the relationship among specific life events (for example, Rahe, 1968; Myers, Lindenthal, Pepper & Ostrander, 1972; Brown, Harris, & Peto, 1973) leading to a broader understanding of the construct. Eventually, a multidimensional theory developed which emphasized stress as being subjectively determined and with its effects dependent upon the availability of personal coping mechanisms and social support systems (Levine & Scotch, 1970; Warheit, 1979).

Stress and Migration

Migration has been conceptualized as a process that involves structural changes which may constitute a potential source of stress (Shuval, 1982). The major changes inherent in migration and the acculturation process are of a physical, social, and cultural nature.

(1) Physical change includes environmental factors such as differences in climate, geographic characteristics, IQ, housing, and living conditions. Physical environments communicate meanings and information about oneself and others and influence the nature of relationships and social behaviors. For example, moving to a city from a rural situation may have an impact on psychological and social adjustment (Kaminoff & Proshansky, 1982).

(2) Social change refers to disengagement from a network of social relations the immigrant leaves behind, as well as the need to learn new styles of interpersonal communication and establish new ties. Immigrants experience different levels of difficulty in developing such alternative relations in their new location. For example, meaningful establishment of new relationships may be affected by limited knowledge of the language, rules of interaction, and social expectancies.

(3) Cultural change involves the need to learn new values, customs, habits, and norms, and to either abandon or adapt old ones. The greater the gap between the cultural values of the place of origin and the host country, the greater the conflict. Born (1970) has defined as "acculturative stress" precisely the conflict which arises for immigrants in their efforts to resolve or minimize cultural differences.

The change process in physical, social and cultural areas may of itself weaken coping mechanisms. Although the process doesn't automatically result in stress, there is considerable evidence linking migration with mental illness (Shuval, 1982).

Stress and Immigrant Children

Most of the research on stress has been done with adults, however, in recent years, greater attention has been given to the effects of stress on the emotional adjustment of children (Brenner, 1988; Garmezy & Rutler, 1983). Likewise, there has been limited study of migration factors and acculturative stress with children. Although migration stress does not automatically result in maladjustment — in fact, some immigrant children identified as "invulnerable" adjust quite well under adverse circumstances — there are still numerous children who are vulnerable as a result of poor coping skills or the unavailability of adequate support systems. In a review of the literature, Aronowitz (1984) found that the major negative effects of stress on immigrant children are reflected in behavioral disorders in the school setting and in identity conflicts.

What are some of the stressors involved in the acculturation process that may affect immigrant children? Migration, or leaving the place of origin, may be considered the first step in the acculturation process. Children who migrate often experience the loss of friends, severance of extended family ties, and anxiety about separation, and the unfamiliarity of the new situation. As a result, children may become withdrawn, aggressive or exhibit behavioral disorders that may be a form of "masked depression." These problems are exacerbated for refugee children who suffered the effects of war or political unrest in their native country. Studies of post-traumatic war effects on children show that the group bonding and support that emerges and acts as a buffer in a crisis, when lost, can give way to symptomology and maladjustment. For example, Le (1983) has described the incidences of developmental arrests and transitional psychoses experienced by Vietnamese and Cambodian children during or soon after the migration process.

Stressors in the physical environment also have a strong impact. Although immigrant children come from various socioeconomic backgrounds, those with a low socioeconomic status are particularly at risk. The effects of poverty on stress have been well documented. For example, Canino, Early, and Rogler (1980) found that Puerto Rican children in poor urban areas were subject to health problems, low self-esteem, depression, aggression, and academic problems. Chinese-American children in ghetto areas experience greater isolation and anxiety than do their ethnic peers in suburban environments (Chin, 1983).

The impact of social change as part of the acculturation process is most likely to be experienced by children in the school setting. It is in this context where the child has direct social encounters with the dominant culture. A major issue centers around social acceptance by peers and teachers. A sense of specialness or of being different may replace the sense of belongingness that the child may have had. The more distinctly different the culture or situation the more intensely this difference will be felt. The problem is worsened by discrimination or prejudice, and often encountered when the ethnic group to which the child belongs is negatively perceived or devalued by society. Other tasks involve the need to learn new social interactions, new ways of communicating feelings, and new roles and customs.

Learning a new language may also be a source of stress. Initially, problems may come from fear of speaking English in a group situation as is reflected in the high incidence of "elective mutism" among bilingual children. Personality characteristics also influence second language acquisition. For example, extroverted or quiet but reflective students learn much faster than those who are either shy or aggressive. Even when conversational aspects of the language are learned, children need more time to learn those aspects of language involving academic achievement. The problem is exacerbated for those students who lack formal learning experiences (Cummins, 1982).

Finally, stress is experienced when there is a discrepancy between the child's cultural values and those encouraged in the dominant school culture in terms of behavioral style; for example, in some cultures, cooperation and interdependence rather than competitiveness are encouraged for success in school. Behaviors that are adaptive according to the child's culture may be viewed as signs of maladjustment within the school context (Esquivel & Keitel, 1990).

Approaches to Intervention

Use of mental health services by immigrant children

Generally, immigrant children and their families tend to have limited support systems (Esquivel & Keitel, 1990). Further, they tend not to utilize the support services which are available (Acosta, Yamamoto, & Evans, 1982). Numerous barriers to the use of counseling services exist including (a) culturally biased assessment procedures, (b) the language of the counseling interview, (c) a reliance on less traditional forms of therapy or a reliance on the family for support, and (d) cultural and ethnic differences between the potential client and the service providers (Esquivel & Keitel, 1990). Therefore, it is especially important that schools recognize the need to provide services to immigrant children.

Goals of Interventions

We have identified several primary long term goals to be attained through interventions with immigrant children: (a) to allow immigrant children to retain and develop an acceptance of their own ethnicity or racial identity and to develop a multicultural identity, (b) to become bicultural, that is, to develop a fluency with both the host culture and the native culture, (c) to promote understanding between the host country and the immigrant cultures and to correct stereotypes.

In addition, we have identified several short-term goals, all of which have to do with promoting personal adjustment including: (a) the relief of experienced stress, (b) the increase of one's repertoire of coping skills, and (c) the response of schools to issues of culture shock and acculturation as they are experienced by the immigrant child.

Types of Interventions

Interventions with immigrant children must be of two types, that is, programmatic and individual. Programs and individual interventions must be targeted towards various groups and individuals including parents and other family members, school counselors and psychologists, teachers, other school personnel and administrators, immigrant children's peers, community mental health personnel, and other community and church members (American School Counselor Association, 1989).

Before meaningful interventions can be implemented, individuals must be sensitized to similarities and differences among cultural groups, that is, individuals' awareness and consciousness must be raised. Further, specific information regarding the culture, beliefs, and ?(s) must be learned (Gay cited values of the immigrant group in Luftig, 1983).

How can consciousness be raised? Through inservice training school personnel including administrators, counselors, teachers, psychologists, and support personnel can be sensitized to issues and stressors which affect immigrant children (Esquivel & Keitel, 1990). In the same way, specific information regarding a specific immigrant group can be presented in order to educate school personnel about the culture, beliefs, and values of the immigrant group. Community members and/or parents who belong to the immigrant group can serve as resources for inservice training (Exum, 1982).

Program interventions with immigrant children

In order to intervene with immigrant children it is necessary to target a number of individuals other than the immigrant children including: (a) parents of immigrant children and other parents of school children already assimilated into the host country culture and/or parents of children of the majority culture, (b) school children already assimilated into the host country and/or members of the majority culture, (c) community members, (d) school personnel.

Interventions with parents

Parent programs can be presented which address the stressors discussed earlier.

1. For example, dialogue between parents, counselors and teachers might center on the differing values of immigrant children and American children, (i.e., members of the majority culture), and how the values and beliefs as they are adopted by the immigrant children may clash with those values held by their parents (Brislin & Pederson, 1976).

For example, dating behaviors may be different from the native culture, or the value placed on education may differ (Shahmirzadi, 1983).

Parents who are members of the immigrant group(s) but who have successfully navigated the acculturation process could be invited to serve as consultants. Such individuals can tell about their own experiences, provide information about the host country and the native country, and relate this information to the new immigrants' experiences (adapted from Yao, 1989).

2. Sessions for parents can provide information on children's developmental stages. Because adolescence is a particularly volatile time for most individuals, it is important that the parents of immigrant children be provided with information regarding developmental stages.

3. A summer visitation program initiated by the school can be useful to develop and promote the lines of communication between the family and the school, can inform the parents of school policies and procedures, and can serve to promote some feelings of belonging by welcoming the family into the community. Such a program would include (a) home visits by the counselor, (b) invitations to visit the school prior to enrolling the student in school, (c) the organization of parties or picnics for all newcomers including immigrants and others, (d) a school orientation program (adapted from Keats, Crabbs, & Crabbs, 1981; and Panagos, Holmes, Thurman, Yard & Spaner, 1981).

Interventions with peers

Peer groups must also be targeted.

1. Classroom instruction can include information which promotes the understanding and tolerance of cultural differences. Further, children can be taught that diversity is valuable and the acceptance of others can be promoted. In other words, information about different cultures, belief systems, and value systems must be infused into the curriculum (Aronowitz, 1984; Das & Hardor, 1989; Yao, 1989).

2. Peer helpers (tutor/counselor) who have been trained in interpersonal relations and a multicultural counseling perspective can help to relieve some stress immigrant children face. A student from the host country can be assigned as a buddy to the new immigrant child (adapted from Hanelka, 1978). This may promote understanding between the two cultures and can help the immigrant child to feel less isolated. At the same time, children in the school setting who belong to the same immigrant groups can be assigned to teams (small groups of 6-8) to also promote feelings of belongingness.

Individual and small group interventions

Teachers, counselors, psychologists and other school personnel must be available to provide support to individual children. However, it is imperative that these individuals be sensitive to cultural differences. Further, such individuals must be aware of the acculturation process, the stages of culture shock, and must understand that immigrants experience culture shock, so that they can respond with empathy and respect.

Through small groups and/or through individual sessions, counselors can assist immigrant children in dealing with the stress which results from culture shock and acculturation in the following ways.

1. Organization and planning: Help students decide what they need to learn first, help them to break down the problems into smaller ones, then help them prioritize these problems and develop plans to deal with their problems.

Have students write down their plans and help them to remain committed to their plan either through group or individual support (adapted from Robinson, 1984).

2. Provide ways for children to meet their peers and make friends — peer programs mentioned earlier might be one way to do this. Since other family members are probably also feeling the stress of culture shock, children may find that the support they had in their home country no longer is available to them. Help them to understand that their parents and siblings are experiencing similar feelings and provide them with other resources.

3. Help students to see the humor in situations, especially those which result from being in a new country. Help them to not take themselves too seriously. Acknowledge the loss they are experiencing and provide support and empathy for that loss, at the same time encourage them to experience the present and take personal risks such as making new friends etc.

4. Encourage students to be physically fit. Provide physical activities with which the children can be involved.

5. Help children to understand the stages of culture shock — recognize which stage they are in at a given time.

6. Through counseling interviews or small group activities assess individuals communication, coping and social skills, that is identify how willing and able individuals are: (a) to ask for help, (b) to express feelings openly or to express certain feelings such as anger or fear, (c) to resist peer pressure, (d) to resist adult demands, particularly when such demands exceed the child's capabilities, for example, using the child to solve adult problems, (e) to activate the parasympathetic nervous system, that is, a relaxation response, (f) and assess the child's level of social skill; children with poorly developed social skills may not be successful at meeting others and making friends, or getting along with teachers, and finally, (g) assess the quality of communication between the immigrant child and his/her parents. Since parents may also be experiencing stress, it is possible that parents are not as available to listen and talk with their children as they were in their country of origin. In response to this assessment, the counselor then may decide to implement relaxation training, social skills training, peer support groups of members of the same or very similar immigrant groups, and/or communication training (adapted from Duncan, 1983).

Summary

This presentation has focused on the impact of migration and acculturation on immigrant children in the United States. Stress factors that affect these children have been identified and discussed. Because immigrant children are less likely to use traditional mental health services, this presentation suggests that the public school system must take the lead in servicing these children. Individual and programmatic interventions which could be implemented in the public school setting have been presented.

References

Acosta, F., Yamamoto, J., & Evans, L. A. (1982). *Effective psychotherapy for low income and minority patients*. New York: Plenum Press.

American School Counselor Association (1989). Position Statement: Cross/Multi-Cultural Counseling. *Elementary School Guidance and Counseling*, *23*, 322-323.

Aronowitz, M. (1984). The social and emotional adjustment of immigrant children: A review of the literature. *International Migration Review*, *18*, 237-257.

Bagley, C. (1972). Deviant behavior in English and West Indian School Children. *Research in Education*, *8*, 47-55.

Berry, J. W., Kim, U., Power, S., Young, M., & Bujaki, M. (1989). Acculturation attitudes in plural societies. *International Association of Applied Psychology*, *38*, 185-206.

Brenner, A. (1984). *Helping children cope with stress*. Lexington, MA: Heath.

Brislin, R. W., & Pederson, P. (1976). *Cross-cultural orientation programs*. New York: Gardner Press.

Brown, G. W., Harris, T. O. & Peto, J. (1973). Life events and psychiatric disorders, Part 2: Nature of causal levels. *Psychological Medicine*, 3, 159-176.

Burnam, M. A., Hough, R. L., Telles, C. A., Karno, M., & Escobar, J. I. (1987). Measurement of acculturation in a community population of Mexican Americans. *Hispanic Journal of Behavioral Sciences, 9*, 105-130.

Canino, I. A., Earley, B. R., & Rogler, L. H. (1980). *The Puerto Rican child in New York City: Stress and mental health* (Monograph No. 4). New York: Hispanic Research Center, Fordham University.

Cannon, W. B. (1928). The mechanism of emotional disturbance of bodily function. *New England Journal of Medicine, 198*, 877-88.

Chin, J. L. (1983). Diagnostic considerations in working with Asian Americans. *American Journal of Orthopsychiatry, 53*, 100-109.

Chiswick, B. (1977). Sons of immigrants: Are they at an earnings disadvantage? *American Economic Review, Papers and Proceedings, 67*, 376-380.

Coelho, G. V. & Stein, J. J. (1988). Change, vulnerability, and coping: Stresses of Uprooting and overcrowding. In G. V. Coelho & P. I. Ahmed (Eds.), *Uprooting and development: Dilemmas of coping with modernization.*

Cummins, J. (1982). Test achievement, and bilingual students. *Focus*, 1-7.

Das, A. K., & Harala, M. A. (1989). Toward multicultural education and counseling: The Duluth experience. *Elementary School Guidance and Counseling, 23*(4), 306-312.

Duncan, D. F. (1983). *Stress and children: A theoretical overview.* (Report No. SP022385). Minneapolis, MN: Annual Meeting of the American Alliance for Health, Physical Education, Recreation and Dance. (ERIC Reproduction Service No. ED 230 542)

Esquivel, G. B., & Keitel, M. A. (1990). Counseling immigrant children in the schools. *Elementary School Guidance and* Counseling, *24*(3), 213-221.

Exum, H. A. (1982). The most invisible minority: The culturally diverse elderly. *The School Counselor, 30*(1), 15-24.

Garmezy, N., & Rutler, M. (1983). *Stress, coping and development in children.* New York: McGraw-Hill.

Gordon, M. M. (1964). *Assimilation in American life.* New York: Oxford University Press.

Havelka, J. P. (1978). Student orientation: A problem-solving approach. *NASSP Bulletin, 62*, 50-55.

Haney, W. (1987). *An estimation of immigrant and immigrant student populations in the United States as of October 1986.* Background paper for immigrant student project, Boston College, Boston, MA.

Hirshman, C. (1982). Immigrants and minorities: Old questions for new directions in research. *International Migration Review, 16*, 474-490.

Kaminoff, R. D., & Proshansky, H. M. (1982). Stress as a consequence of the urban physical environment. In L. Goldberg & S. Breznitz (Eds.) *Handbook of stress: Theoretical and clinical aspects* (pp. 380-409). New York: The Free Press.

Keats, D. B., Crabbs, M. A., & Crabbs, S. K. (1981). Facilitating the adjustment process of new students. *Elementary School Guidance and Counseling, 15*, 319-323.

Le, D. D. (1983). Mental health in Vietnamese children. In G. F. Powell (Ed.), *The psychosocial development of minority group children* (pp. 373-384). New York: Brunner/Mazel.

Luftig, R. L. (1983). Effects of schooling on the self-concept of native American students. *The School Counselor*, 251-260.

Mena, F. J., Padilla, A. M., & Maldonado, M. (1987). Acculturative stress and specific coping strategies among immigrant and later generation college students. *Hispanic Journal of Behavioral Sciences, 9*, 207-225.

Mirsky, J., & Kausinsky, F. (1989). Migration and growth: Separation-individuation processes in immigrant students in Israel. *Adolescence, 24*, 225-240.

Myers, J., Lindenthal, J., Pepper, M., & Ostrander, D. (1972). Life events and mental states: A longitudinal study. *Journal of Health and Social Behavior, 13*, 398-400.

Padilla, A. M. (1980). The role of cultural awareness and ethnic loyalty in acculturation. In A. M. Padilla (Ed.), *Acculturation: Theory models and some new findings* (pp. 47-84). Boulder, CO: Westview Press.

Panagos, J. L., Holmes, R. L., Thurman, R. L., Yard, G. L., Spaner, S. D. (1981). Operation SAIL: One effective model for the assimilation of new students into a school district. *Urban Education, 15*, 451-468.

Pederson, P. B., Draguns, J. G., Lonner, W. J., Trimble, J. E. (1981). *Counseling across cultures.* Honolulu: University of Hawaii Press.

Rahe, R. H. (1968). Life change measurement as a predictor of illness. *Proceedings of the Royal Society of Medicine, 61*, 1124-1126.

Robinson, J. (1984). *Culture shock: Information packet for developing stress/culture shock programs for students in overseas schools.* (Report CGB17749). Colombo, Sri Lanka: NE/SA Teachers' Conference. (ERIC Document Reproduction Service No. ED 249 430)

Rogler, L. M., Malgady, R. G., Constantino, G., & Blumenthal, R. What do culturally sensitive mental health services mean? The case of Hispanics. *American Psychologist, 42*, 565-570.

Selye, H. (1956). *The Stress of Life*. New York: McGraw Hill.

Shahmirzadi, A. (1983). Counseling Iranians. *Personnel and Guidance Journal, 61*(8), 487-489.

Shuval, J. T. (1989). Migration and stress. In L. Goldberg & S. Breznitz (Eds.), *Handbook of stress: Theoretical and clinical aspects* (pp. 671-691). New York: The Free Press, 677-691.

Taft, R. (1979). A comparative study of the initial adjustment of immigrant school children in Australia. *International Migration Review, 13*, 71-80.

Wong-Rieger, D., & Quintana, D. (1987). Comparative acculturation of Southeast Asian and Hispanic immigrants and sojourners. *Journal of Cross-Cultural Psychology, 18*, 455-462.

MINORITY STUDENT RECRUITMENT SECRET TO SUCCESS?

Lisa Porche-Burke and Msemaji Webb
California School of Professional Psychology
Los Angeles, California

Christine Ijima-Hall
University of Arizona
Phoenix, Arizona

In this brief presentation we discuss issues related to the recruitment and retention of students of color and present the model that is used at the California School of Professional Psychology: Los Angeles (CSPP: Los Angeles) to address these issues. If one surveys the literature, it is easy to note the ever-present shortage of ethnic mental health professionals in the field of psychology (President's Commission on Mental Health, 1978) as well as the continuing underrepresentation of ethnic students and faculty (Bernal, Barron, & Leary, 1983). The rapidly increasing numbers of culturally diverse individuals who potentially may seek psychological services is clearly disproportionate to the numbers of ethnic individuals entering into and finishing doctoral programs in the field of psychology (Bernal et al., 1983). We know that, although ethnic individuals have nearly doubled their number among doctoral recipients in recent years, they still represent roughly 9% of the new doctorates (J. M. Jones, 1987). Furthermore, although ethnic students have shown interest in psychology and psychology-related experiences, their numbers in graduate school programs simply do not reflect their interest (J. M. Jones, 1987).

Why, then, does there appear to be difficulty in the recruitment and subsequent retention of students of color in graduate program? It is my opinion that these problems occur because most institutions are not fully committed to, and do not behave in ways that allow for, successful recruitment and retention of students of color. If institutional values do not support the development of policies and programs that are geared toward successful recruitment and retention of ethnic students, then, in fact, the situation that currently exists in most graduate school programs in psychology is fully realized.

When we talk about institutional values, we are in essence asking why, and for what reason, institutions are committed to having a diverse and mixed group of students within their educational structure. And further, we are asking what institutions plan to do to make recruitment and retention efforts for ethnic students successful. It may be useful at this point to discuss some of the reasons that may, in fact, explain poor recruitment and retention.

WHY RECRUITMENT FAILS

The first critical step in the process of recruitment is the initial communication between the prospective applicant and the graduate program. Clearly, it will be difficult to attract the potential students of color if the program materials do not adequately describe (a) the training opportunities and facilities for working with ethnic diverse groups, (b) curriculum that addresses issues of color that not only prepares students to function as psychologists but also addresses issues of diversity for the application of psychological principals to diverse groups, (c) availability of an ethnic student support group, and (d) other types of information that clearly indicate an interest in and commitment to issues related to diverse populations (Bernal et al., 1983). Furthermore, application materials should clearly indicate the program's interest in and commitment to alleviating the financial hardships that a graduate education creates. In my experience, financial concern is one of the critical reasons why students of color are not attracted to and more widely represented in most graduate programs in psychology. Without adequate financial support, the problem of cost may be perceived as insurmountable. Students who need to work full-time, in addition to managing a graduate school program and their personal lives, may perceive the price as too great and hence be deterred from the process. Therefore, application materials need to address the financial aspect and provide substantive information regarding the available financial opportunities. Family responsibilities are yet another deterrent of successful recruitment.

It is during the college years that students begin to think about potential career opportunities. Undergraduates who have not been advised adequately about careers in psychology may be lured to other fields that do better job of attracting them. Accordingly, recruiting efforts should be targeted to ethnic students during their undergraduate years. Graduate programs interested in attracting and successfully recruiting ethnic students are advised to approach students during their undergraduate years. Not only should students be provided with a description of the ways in which the program would satisfy the needs of students of color, but undergraduate students should be exposed to both the program and to graduate students in the program. An example of an implemented strategy here would be holding a summer institute.

Another issue that influences recruitment negatively is the lack of planned and thoughtful recruitment procedures that are designed to be inclusive rather than exclusive. Examples include the presence of standards that are prohibitive to students of color, such as achieving a fixed score on the Graduate Record Examination or standards that imply in essence, ethnic students are not qualified and hence need to be treated in a "special way". Will an ethnic student, planning a future career, be attracted to a graduate program in psychology that has erected a barrier at the onset? No, the cost is simply too great to bear. Therefore flexible programs or ways of matriculating needs to be offered (i.e. part-time or 3/4 time curriculum).

WHY STUDENTS LEAVE

Let us assume that, in spite of inadequate recruitment procedures, some ethnic students enter into graduate psychology programs. Now the issue of retention become critical. Why, in fact, do graduate students drop out of programs? Many of the reasons why students leave graduate programs are similar, if not identical, to the ones that may have acted as deterrents originally. Financial considerations rank highest. As was discussed earlier, it is extremely difficult for students to make a full-time doctoral program and to work full-time. Unfortunately, this is the situation in which most students find themselves. There is a general lack of support for students of color who have family responsibilities. Programs need to build in support for students who are returning to school subsequent to raising the children or who have families concurrently.

Second, and probably as important, it is extremely difficult to exist, function, and prosper in a setting where racism and sexism go unchecked and are not dealt with in any systematic and formal way. This brings us back to the issue of institutional support and institutional values. If an institution is truly committed to making opportunities available to ethnic students in the field of psychology, it needs to address institutional racism and sexism. Furthermore, it must develop a training program that defines ethnic issues as being important and critical to the overall educational experience, and not specifically defined in terms of its relationship to a student's own ethnicity. A graduate psychology program must incorporate issues that are relevant to diverse ethnic populations into all the curriculum content areas. If it does not, why should ethnic students feel positive about their eduction and training experiences? What message does an institution convey to the ethnic student preparing to matriculate through a doctoral program if it cannot demonstrate any support among the faculty-at-large for the aforementioned issues and has no ethnic faculty to serve as role models within the institutional structure? I contend that the message is not a positive one.

Another critical issue related to successful retention of ethnic minority students is the presence of support groups. These support groups provide students with a forum that helps them to deal with the myriad issues that arise as they matriculate through their respective programs. Support groups also provide a mechanism for sharing coping strategies and increasing ethnic minority faculty involvement with students as faculty members share their own graduate school experiences with students.

I contend that the secret to successful recruitment and retention lies in the presence of strong institutional support that paves the way for (a) the development of admission policies and procedures that are inclusive, (b) financial aid packages that are attractive, and (c) curriculum and training opportunities that reflect a strong interest in and commitment to issues of color. The program at CSPP: Los Angeles is one that has shown some success at both attracting and retaining ethnic students. It may be useful to examine the reasons for its success.

CALIFORNIA SCHOOL OF PROFESSIONAL PSYCHOLOGY: LOS ANGELES

Currently, at CSPP: Los Angeles, students of color make up approximately 18% of the total student population (n=85). Some of the current practices that are followed to recruit and to retain ethnic minority students are as follows.

- Each year, CSPP: Los Angeles hosts two open houses for the purpose of recruitment. Students are invited to come and spend time with administrators, faculty, and students. During this time students are introduced to the program and given the opportunity to interact with ethnic faculty and students.

- Materials are presented to prospective applicants that describe the school and specifically address the school's commitment to diversity and how issues related to ethnic populations are integrated into the curriculum and clinical field training experiences.

- Issues related to financial aid are discussed with each student and financial assistance is made possible. In awarding and determining the composition of aid, CSPP: Los Angeles is alert to racial and ethnic group factors in expense and debt. Institutional funds (e.g. college work-study), scholarships, and teaching assistantships are used for financial support.

- There is a well-developed multicultural and community/clinical program that exists under the aegis of the clinical programs. This specialty track offers students the option of pursuing a Ph.D. accredited by the American Psychological Association or a Psy.D. The Multi-cultural Community/Clinical Program (MCCP) is designed to provide students with an in-depth educational experience that integrates ethnic issues in curriculum and clinical field training experiences. Students are encouraged to develop a level of self-awareness about their ethnic and cultural identity in order to maximize their own resources and subsequently their ability to work with diverse populations. There is a strong students support group for all ethnic students within the MCCP that meets regularly to address student's issues and concerns.

- There is ethnic faculty representation on all admissions decisions, ensuring the presence of an arena in which ethnic issues can be heard. The ethnic faculty participate actively in the development of policies and procedures that are inclusive rather than exclusive.

- Admission requirements are flexible. The presence of a pregraduate program allow students who may not have majored in psychology to take the necessary coursework to make them eligible for matriculation in the Ph.D. program.

- Ethnic students actively participate in the recruitment of other ethnic students. It is important for prospective applicants to see other ethnic students successfully matriculating through the program and to find out, first hand, that they find the educational experience rewarding.

With respect to retention issues, it is clear that effective and successful retention of ethnic minority students cannot be achieved by a narrowly defined effort. These issues must be addressed within a multifaceted framework designed to create an educational environment and experience that ensures the possibility of successful retention. Clearly, increasing the financial opportunities that will help to defray the financial burden of a graduate school education is a critical ingredient for successful retention of students of color. The freedom from financial exigency allows students to concentrate fully on the educational experience and to realize their potential in the profession. In addition, if a program puts forth the effort to provide financial opportunities for students, it makes a strong statement about its sensitivity to the needs of a diverse student population.

The MCCP at CSPP: Los Angeles specifically was designed to address these issues. Four aspects of the program are conceptualized as the "quad approach," that integrate curriculum, clinical field training, research, and professional development and role modeling with specific focus on multicultural issues. To look at retention issues specifically, the fourth component of the program, professional development and role modeling, particularly is designed to help ensure successful retention. The specific components of this quad are as follows.

- Student support and retention dinners are held five times a year. Ethnic students are invited to participate in dinner discussions with professional role models from the community. Issues related to coping strategies, time management, and professional development are discussed, and students are given the opportunity to interact informally with ethnic faculty and professionals. This is a critical component of the program as it provides students with an opportunity to gain a clear perspective on what it takes to become a competent psychologist, particularly as it relates to dealing with a variety of individuals from a range of cultural backgrounds (Porche-Burke & Olmedo, 1988).

- Professional development groups is a one-credit course taken during the first two years of a students' matriculation in the program. These groups are designed to provide (a) ongoing professional development advisement for students and (b) a forum within which students discuss issues, such as racism and sexism, that affect their educational experience.

- Faculty and student advisor-advisee relationships are critical to successful retention. Each student is paired with an faculty member who serves as either the student's academic and/or professional development advisor. This allows for close monitoring of student's academic and clinical field training progress during the program and provides each student with an advocate who is sensitive to the needs of the student of color.

- The ethnic student support organization meets regularly. Members of this organization are involved in various activities of the MCCP. For example, each year students plan and execute an annual conference that is devoted to multicultural issues. They are also encouraged to use this group to discuss issues or concerns that may be affecting their progress in the program as well as ways to become socially and politically proactive.
- A peer tutorial program is organized each year by the students to assist second year students in the preparation for comprehensive examinations. Students arrange and hold study sessions and share study materials.
- Dissertation development groups are formed for third- and fourth-year students. Students have an opportunity, on an ongoing basis, to share their research with others and receive feedback and support from both peers and faculty.

Although the aforementioned strategies are critical, none can be truly successful without the presence of strong institutional support and institutional commitment to multicultural issues. We need to stop paying lip service to the issues of successful recruitment and retention. Instead, as a group of educators, we must move toward implementation. The secret of successful recruitment and retention of ethnic minority students lies within us and our ability to create graduate psychology programs that are sensitive to the needs of ethnic students and place ethnic issues in a position of importance.

Portions of this presentation are included in:

Stricker, G., Davis-Russell, E., Bourg, E., Hammond, W., McHolland, J., Polite, K., & Vaughn, B. (Eds.). (1990). *Toward Ethnic Diversification in Training*. Washington, DC: American Psychological Association.